

Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number :		9400274		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: PLANNED PARENTHOOD PA INC												
Street Address:												
City: HARRISBURG						State: PA			Zip Code: 17102-2505			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/>	No	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes		No	
	ANNUAL REPORT	7.	Year 2014	FILING METHOD () CHECK ONE				PAPER	<input checked="" type="checkbox"/>	DISKETTE		
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR				
						11	4	2014				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		5	6	2014		6	9	2014				
A. Amount Brought Forward From Last Report						\$ 70,731.37						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 17,888.81						
C. Total Funds Available (Sum Of Lines A and B)						\$ 88,620.18						
D. Total Expenditures (From Schedule III)						\$ 17,745.98						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 70,874.20						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 3,278.30						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
PLANNED PARENTHOOD PA INC	From: <u>5/6/2014</u> To: <u>6/9/2014</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 714.50

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 0.00
All Other Contributions (Part B)	\$ 1,336.50
TOTAL for the Reporting Period (2)	\$ 1,336.50

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 9,000.00
All Other Contributions (Part D)	\$ 6,837.81
TOTAL for the Reporting Period (3)	\$ 15,837.81

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 17,888.81
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Name of Filing Committee or Candidate	Reporting Period
	From: To:

	DATE	AMOUNT
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

PART B ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

**Use this Part to itemize all other contributions with an aggregate value from
\$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A)**

Name of Filing Committee or Candidate PLANNED PARENTHOOD PA INC				Reporting Period From: <u>5/6/2014</u> To: <u>6/9/2014</u>			
				DATE		AMOUNT	
Full Name of Contributor Leone Schoenberg				MO	DAY	YEAR	\$ 90.00
Mailing Address				6	4	2014	
City Gladwyne	State PA	Zip Code (Plus 4) 19035					
Full Name of Contributor Contance Bastek Karasow				MO	DAY	YEAR	\$ 67.50
Mailing Address				5	12	2014	
City Levittown	State PA	Zip Code (Plus 4) 19056					
Full Name of Contributor Adelbert Tweedie				MO	DAY	YEAR	\$ 90.00
Mailing Address				5	12	2014	
City Kennett Square	State PA	Zip Code (Plus 4) 19348					
Full Name of Contributor Nancy Knerr Light				MO	DAY	YEAR	\$ 180.00
Mailing Address				5	12	2014	
City Bethlehem	State PA	Zip Code (Plus 4) 18015					
Full Name of Contributor Nellie Manges				MO	DAY	YEAR	\$ 90.00
Mailing Address				5	12	2014	
City Allentown	State PA	Zip Code (Plus 4) 18104					
Full Name of Contributor Dennis McDaniel				MO	DAY	YEAR	\$ 54.00
Mailing Address				5	12	2014	
City Washington	State DC	Zip Code (Plus 4) 20008					
Full Name of Contributor Roger Doherty				MO	DAY	YEAR	\$ 90.00
Mailing Address				5	12	2014	
City Wynnewood	State PA	Zip Code (Plus 4) 19096					

Full Name of Contributor Greta Aul			MO	DAY	YEAR	\$ 90.00
Mailing Address			5	12	2014	
City Lancaster	State PA	Zip Code (Plus 4) 17603				
Full Name of Contributor Bev Susswein			MO	DAY	YEAR	\$ 180.00
Mailing Address			5	12	2014	
City Center Valley	State PA	Zip Code (Plus 4) 18034				
Full Name of Contributor Constance Cowen			MO	DAY	YEAR	\$ 180.00
Mailing Address			5	12	2014	
City Allentown	State PA	Zip Code (Plus 4) 18103				
Full Name of Contributor Barbara Woodward			MO	DAY	YEAR	\$ 225.00
Mailing Address			5	12	2014	
City Allentown	State PA	Zip Code (Plus 4) 18104				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL

\$ 1,336.50

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate PLANNED PARENTHOOD PA INC	Reporting Period From: <u>5/6/2014</u> To: <u>6/9/2014</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 8,000.00
DEMOCRATIC LEADERSHIP PAC				5	15	2014	
Mailing Address							
City	PITTSBURGH	State	PA	Zip Code (Plus 4)		15201	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
Friends of Erin Molchany				5	15	2014	
Mailing Address							
City	Pittsburgh	State	PA	Zip Code (Plus 4)		15211	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 9,000.00

PART D
ALL OTHER CONTRIBUTIONS
OVER \$250.00

**Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C.)**

Name of Filing Committee or Candidate PLANNED PARENTHOOD PA INC	Reporting Period From: <u>5/6/2014</u> To: <u>6/9/2014</u>
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				DATE			AMOUNT
Full Name of Contributor Yesenia Bane				MO	DAY	YEAR	\$ 1,387.81
Mailing Address				6	4	2014	
City Harriburg	State PA	Zip Code (Plus 4) 17102					
Employer Name Unknown				Occupation Unknown			
Employer Mailing Address/Principal Place of Business			City Harrisburg		State PA		Zip Code (Plus 4) 17102
Full Name of Contributor Henry Hillman				MO	DAY	YEAR	\$ 5,000.00
Mailing Address				5	15	2014	
City Unknown	State PA	Zip Code (Plus 4) 17102					
Employer Name Unknown				Occupation Unknown			
Employer Mailing Address/Principal Place of Business			City Unknown		State PA		Zip Code (Plus 4) 17102
Full Name of Contributor Morgan Plant				MO	DAY	YEAR	\$ 450.00
Mailing Address				5	12	2014	
City Carlisle	State PA	Zip Code (Plus 4) 17013					
Employer Name Self Employed				Occupation Unknown			
Employer Mailing Address/Principal Place of Business			City Carlisle		State PA		Zip Code (Plus 4) 17013

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 6,837.81

PART E OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Period
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.**

Detailed Summary Page

Name of Filing Committee or Candidate		Reporting Period	
PLANNED PARENTHOOD PA INC		From: <u>5/6/2014</u> To: <u>6/9/2014</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	3,278.30
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	3,278.30

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period From: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

**SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00**

Name of Filing Committee or Candidate	Reporting Period
PLANNED PARENTHOOD PA INC	From: <u>5/6/2014</u> To: <u>6/9/2014</u>

				DATE		AMOUNT					
Full Name of Contributor PLANNED PARENTHOOD VOTES				MO	DAY	YEAR	\$ 21.63				
Mailing Address				6	3	2014					
City	NEW YORK	State	NY	Zip Code(Plus 4)		10001					
Employer of Contributor				PLANNED PARENTHOOD VOTES				Occupation	non profit organization		
Employer Mailing Address/Principal Place of Business				City	New York	State	NY	Zip Code(Plus 4)	10001	Description of Contribution	Travel expenses
Full Name of Contributor PLANNED PARENTHOOD VOTES				MO	DAY	YEAR	\$ 1,613.02				
Mailing Address				5	31	2014					
City	NEW YORK	State	NY	Zip Code(Plus 4)		10001					
Employer of Contributor				PLANNED PARENTHOOD VOTES				Occupation	non profit organization		
Employer Mailing Address/Principal Place of Business				City	New York	State	NY	Zip Code(Plus 4)	10001	Description of Contribution	Staff time donated
Full Name of Contributor PLANNED PARENTHOOD VOTES				MO	DAY	YEAR	\$ 778.02				
Mailing Address				5	17	2014					
City	NEW YORK	State	NY	Zip Code(Plus 4)		10001					
Employer of Contributor				PLANNED PARENTHOOD VOTES				Occupation	non profit organization		
Employer Mailing Address/Principal Place of Business				City	New York	State	NY	Zip Code(Plus 4)	10001	Description of Contribution	Staff time donated
Full Name of Contributor PLANNED PARENTHOOD VOTES				MO	DAY	YEAR	\$ 15.65				
Mailing Address				5	12	2014					
City	NEW YORK	State	NY	Zip Code(Plus 4)		10001					
Employer of Contributor				PLANNED PARENTHOOD VOTES				Occupation	non profit organization		
Employer Mailing Address/Principal Place of Business				City	New York	State	NY	Zip Code(Plus 4)	10001	Description of Contribution	travel expenses

Full Name of Contributor PLANNED PARENTHOOD VOTES			MO	DAY	YEAR	\$ 849.98
Mailing Address			5	29	2014	
City NEW YORK	State NY	Zip Code(Plus 4) 10001				
Employer of Contributor PLANNED PARENTHOOD VOTES			Occupation non profit			
Employer Mailing Address/Principal Place of Business		City New York	State NY	Zip Code(Plus 4) 10001	Description of Contribution staff time with media tracking	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 3,278.30

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
PLANNED PARENTHOOD PA INC	From <u>5/6/2014</u> To: <u>6/9/2014</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
Ampersand Consulting				
Mailing Address	5	7	2014	\$ 14,000.00
City Pittsburg	State	Zip Code (Plus 4)	Description of Expenditure	
	PA	15201	Consultant	
To Whom Paid	MO	DAY	YEAR	
Planned Parenthood Keystone				
Mailing Address	5	20	2014	\$ 1,359.35
City Trexlerstown	State	Zip Code (Plus 4)	Description of Expenditure	
	PA	18087	Reimbursement	
To Whom Paid	MO	DAY	YEAR	
Bryn Mawr College				
Mailing Address	6	4	2014	\$ 163.50
City Bryn Mawr	State	Zip Code (Plus 4)	Description of Expenditure	
	PA	19010	Space Rental	
To Whom Paid	MO	DAY	YEAR	
Stephen Latanishen				
Mailing Address	6	4	2014	\$ 157.08
City Lititz	State	Zip Code (Plus 4)	Description of Expenditure	
	PA	17543	Reimbursement	
To Whom Paid	MO	DAY	YEAR	
Linsey Gingrich				
Mailing Address	6	6	2014	\$ 138.71
City Carlisle	State	Zip Code (Plus 4)	Description of Expenditure	
	PA	17013	Reimbursement	
To Whom Paid	MO	DAY	YEAR	
Friends of Molchany				
Mailing Address	6	9	2014	\$ 1,500.00
City Pittsburg	State	Zip Code (Plus 4)	Description of Expenditure	
	PA	15211	Donation	

To Whom Paid Planned Parenthood PA Advocates			MO	DAY	YEAR	\$ 203.67
Mailing Address			6	6	2014	
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure Reimbursement			

To Whom Paid TransFirst LLC			MO	DAY	YEAR	\$ 20.00
Mailing Address			5	12	2014	
City Unknown	State PA	Zip Code (Plus 4) 17102	Description of Expenditure Bank Fee's			

To Whom Paid Planned Parenthood PA Advocates			MO	DAY	YEAR	\$ 203.67
Mailing Address			5	12	2014	
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure Reimbursement			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 17,745.98

