

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: 1514 N 2ND STREET FL											
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 POST-PRIMARY	3. X	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	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	TO	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
My Commission Expires _____
MO DAY YR

Signature of Person Submitting Report

Printed Name

Email

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
My Commission Expires _____
MO DAY YR

Signature of Candidate

Printed Name

Email

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
---	--------------

PART A
CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

**Use this Part to itemize only contributions received from political committees
with an aggregate value from \$50.01 to \$250.00 in the reporting period.**

Name of Filing Committee or Candidate	Reporting Period
	From: To:
DATE AMOUNT	

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

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

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 Barbara Woodward			MO	DAY	YEAR	\$ 225.00
Mailing Address 2803 Chew Street			5	12	2014	
City Allentown	State PA	Zip Code (Plus 4) 18104				
Full Name of Contributor Constance Cowen			MO	DAY	YEAR	\$ 180.00
Mailing Address 1600 Lehigh Pky E Apt 5F			5	12	2014	
City Allentown	State PA	Zip Code (Plus 4) 18103				
Full Name of Contributor Bev Susswein			MO	DAY	YEAR	\$ 180.00
Mailing Address 3032 Village Drive			5	12	2014	
City Center Valley	State PA	Zip Code (Plus 4) 18034				
Full Name of Contributor Greta Aul			MO	DAY	YEAR	\$ 90.00
Mailing Address 917 Columbia Avenue			5	12	2014	
City Lancaster	State PA	Zip Code (Plus 4) 17603				
Full Name of Contributor Roger Doherty			MO	DAY	YEAR	\$ 90.00
Mailing Address 281 Hathaway Lane			5	12	2014	
City Wynnewood	State PA	Zip Code (Plus 4) 19096				

Full Name of Contributor Dennis McDaniel			MO	DAY	YEAR	\$ 54.00
Mailing Address 3701 Conn Avenue NW 132			5	12	2014	
City Washington	State DC	Zip Code (Plus 4) 20008				
Full Name of Contributor Nellie Manges			MO	DAY	YEAR	\$ 90.00
Mailing Address 800 Hausman Road Apt 147			5	12	2014	
City Allentown	State PA	Zip Code (Plus 4) 18104				
Full Name of Contributor Nancy Knerr Light			MO	DAY	YEAR	\$ 180.00
Mailing Address 1655 Whiteacre Drive			5	12	2014	
City Bethlehem	State PA	Zip Code (Plus 4) 18015				
Full Name of Contributor Adelbert Tweedie			MO	DAY	YEAR	\$ 90.00
Mailing Address 248 Crosslands Drive			5	12	2014	
City Kennett Square	State PA	Zip Code (Plus 4) 19348				
Full Name of Contributor Contance Bastek Karasow			MO	DAY	YEAR	\$ 67.50
Mailing Address 1352 Oakland Avenue			5	12	2014	
City Levittown	State PA	Zip Code (Plus 4) 19056				
Full Name of Contributor Leone Schoenberg			MO	DAY	YEAR	\$ 90.00
Mailing Address Waverly Heights Villa 52, 1400 Waverly Road			6	4	2014	
City Gladwyne	State PA	Zip Code (Plus 4) 19035				

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>
---	--

			DATE	AMOUNT		
Full Name of Contributing Committee	Mailing Address	City	MO	DAY	YEAR	
DEMOCRATIC LEADERSHIP PAC	3445 Butler Street	PITTSBURGH	5	15	2014	\$ 8,000.00
State PA	Zip Code (Plus 4) 15201					
Friends of Erin Molchany	150 Bertha Street	Pittsburgh	5	15	2014	\$ 1,000.00
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>
---	--

				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Yesenia Bane	6	4	2014	\$	1,387.81
Mailing Address 260 Cumberland Street					
City Harrisburg					
State PA					
Zip Code (Plus 4) 17102					
Employer Name Unknown	Occupation Unknown				
Employer Mailing Address/Principal Place of Business Unknown	City Harrisburg		State PA	Zip Code (Plus 4) 17102	
Henry Hillman	5	15	2014	\$	5,000.00
Mailing Address Unknown					
City Unknown					
State PA					
Zip Code (Plus 4) 17102					
Employer Name Unknown	Occupation Unknown				
Employer Mailing Address/Principal Place of Business Unknown	City Unknown		State PA	Zip Code (Plus 4) 17102	
Morgan Plant	5	12	2014	\$	450.00
Mailing Address 322 S West Street					
City Carlisle					
State PA					
Zip Code (Plus 4) 17013					
Employer Name Self Employed	Occupation Unknown				
Employer Mailing Address/Principal Place of Business 322 S West Street	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		
	From:	To:	

Full Name	DATE			AMOUNT
	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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 PLANNED PARENTHOOD PA INC	Reporting Period 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 RECEIVED - 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:

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	
Mailing Address						\$ 0.00
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 PLANNED PARENTHOOD PA INC	Reporting Period From: <u>5/6/2014</u> To: <u>6/9/2014</u>
---	--

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
PLANNED PARENTHOOD VOTES							
Mailing Address 434 W 33RD ST				6	3	2014	\$ 21.63
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 434 W 33rd Street		City New York	State NY	Zip Code(Plus 4) 10001	Description of Contribution Travel expenses		

				MO	DAY	YEAR	
PLANNED PARENTHOOD VOTES							
Mailing Address 434 W 33RD ST				5	31	2014	\$ 1,613.02
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 434 W 33rd Street		City New York	State NY	Zip Code(Plus 4) 10001	Description of Contribution Staff time donated		

				MO	DAY	YEAR	
PLANNED PARENTHOOD VOTES							
Mailing Address 434 W 33RD ST				5	17	2014	\$ 778.02
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 434 W 33rd Street		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 434 W 33RD ST				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 434 W 33rd Street		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 434 W 33RD ST				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 434 W 33rd Street		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	5	7	2014	\$ 14,000.00
Mailing Address 3445 Butler Street, Suite 101				
City Pittsburg	State PA	Zip Code (Plus 4) 15201	Description of Expenditure Consultant	
To Whom Paid Planned Parenthood Keystone	5	20	2014	\$ 1,359.35
Mailing Address PO Box 813				
City Trexlertown	State PA	Zip Code (Plus 4) 18087	Description of Expenditure Reimbursement	
To Whom Paid Bryn Mawr College	6	4	2014	\$ 163.50
Mailing Address 101 N Merion Ave				
City Bryn Mawr	State PA	Zip Code (Plus 4) 19010	Description of Expenditure Space Rental	
To Whom Paid Stephen Latanishen	6	4	2014	\$ 157.08
Mailing Address 103 Gingrich Drive				
City Lititz	State PA	Zip Code (Plus 4) 17543	Description of Expenditure Reimbursement	
To Whom Paid Linsey Gingrich	6	6	2014	\$ 138.71
Mailing Address 11 South Pitt Street				
City Carlisle	State PA	Zip Code (Plus 4) 17013	Description of Expenditure Reimbursement	

To Whom Paid Friends of Molchany			MO	DAY	YEAR	
Mailing Address PO Box 60122			6	9	2014	
City Pittsburg	State PA	Zip Code (Plus 4) 15211	Description of Expenditure Donation			
To Whom Paid Planned Parenthood PA Advocates			MO	DAY	YEAR	
Mailing Address 1514 N 2nd Street			6	6	2014	
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure Reimbursement			
To Whom Paid TransFirst LLC			MO	DAY	YEAR	
Mailing Address Unknown			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	
Mailing Address 1514 N 2nd Street			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

