### **Campaign Finance Report**

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

Filer Identificati Number :	on 9400	)274				port ed B		CAND	IDATE		СОМ	<b>4ITTEE</b>	✓	LOB	BYIST		
Name of Filing C	ommittee, Candid	late or L	obbyist:		PLA	ANNE	D PAI	RENTHO	OD PA	INC							
Street Address:	1514 N 2ND	STREET	FL														
City:	HARRISBURG	ì						State:	PA			Zip Cod	le: 17	7102-2	505		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY I PRIMARY	PRE-	-	2.	30 DA		POST-	3. <b>X</b>		AMENDM REPORT?		Yes	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA		POST-	6.		TERMINA REPORT?		Yes	No	•	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2014					IG METH CHECK C				PAPER		<b>/</b>	DISKE	TTE	
Name of Office S	ought by Candida	ite:						DATE (	OF ELE	CTIC	N	District Number	Office Code	Pai	ty Code	Coun	
								МО	DAY	YI	AR	Number	code			code	
								11		4	2014		(SEE IN	STRUCTI	ONS FOR (	CODES	)
	Receipts and	МО	DAY YI	EAR	l			МО	DAY	YI	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		5 6	2(	014	T	0	6	5	9	2014						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$	-		70,	731.37						
B. Total Moneta	ary Contributions	And Rec	eipts (From S	che	dule	e I)	\$			17,8	388.81						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			88,6	520.18	]					
D. Total Expend	ditures (From Sch	edule II	I)				\$			17,7	45.98						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			70,8	74.20						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	le II	I)	\$			3,2	78.30						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•			
			A	۱FF	ΊD	AVI	T SE	CTION									
PART I - If this is	a Committee rep	ort, trea	surer sign hei	re. I	[f th	his is	a Car	ndidate r	eport,	candi	date sig	jn here.					
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	e attached sched	lules	file	ed on	paper	or by elec	tronic m	edium	, are to t	the best o	f my kno	wledge	and beli	ef , tru	ue,
Sworn to and subs	cribed before me thi day of	s	20							9	ignature	e of Perso	n Submit	ting Re	oort		
	Signatu	ıre					- -					Prin	ted Name	e			
My Commission Ex	rpires						_					Ema	il				
	МО	D	AY	YR					Ar	ea Cod	le	Daytim	e Telepl	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Co	mm	nitte	ee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of e	my knowle	edge and belief	this	poli	itical	comm	ittee has ı	not viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this day of		20								s	ignature o	of Candid	ate			-
							-					Printe	d Name				-
My Commission F	Signature						-					Ema	il				_
My Commission Exp	es						_										_
	МО	D	AY	ΥR					Area	Code		Da	aytime T	elephor	ne Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
PLANNED PARENTHOOD PA INC	From:	<u>5/6/201</u>	<u>4</u> To:	6/9/2014
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	17,888.81

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporti	ng Period			
			From:		То	:	
		L		DATE			AMOUNT
Full Name of Contributin	g Committee		МС	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

## 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 Candidat								
PLANNED PARENTHOOD PA INC			Froi	m:	<u>5/6/2</u>	2 <u>014</u> To	):	6/9/2014
					DATE			AMOUNT
Full Name of Contributor Leone Schoenberg				МО	DAY	YEAR		
Mailing Address Waverly Heights VI	lla 52, 1400 Waverl	y Road					\$	90.00
<b>City</b> Gladwyne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19035		6	4	2014		
Full Name of Contributor Contance Bastek Karasow				МО	DAY	YEAR		
Mailing Address 1352 Oakland Aven				5	12	2014	\$	67.50
<b>City</b> Levittown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19056						
Full Name of Contributor Adelbert Tweedie				МО	DAY	YEAR		
Mailing Address 248 Crosslands Driv	/e						\$	90.00
City Kennett Square	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19348		5	12	2014		
Full Name of Contributor Nancy Knerr Light				МО	DAY	YEAR		
Mailing Address 1655 Whiteacre Dri	ve <b>State</b>	Zip Code (Plus 4)		5	12	2014	\$	180.00
<b>City</b> Bethleham	PA	18015						
Full Name of Contributor Nellie Manges				МО	DAY	YEAR		
Mailing Address 800 Hausman Road	Apt 147						\$	90.00
City Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18104		5	12	2014		

Full Name of Contributor						1
Dennis McDaniel			МО	DAY	YEAR	
Mailing Address 3701 Conn	Avenue NW 132					<b>\$</b> 54.00
City Washington	State	Zip Code (Plus 4)	5	12	2014	
	DC	20008				
Full Name of Contributor Roger Doherty			МО	DAY	YEAR	
Mailing Address 281 Hathaw	vay Lane					<b>\$</b> 90.00
<b>City</b> Wynnewood	State	Zip Code (Plus 4)	5	12	2014	
· wymiewood	PA	19096				
Full Name of Contributor Greta Aul	· · · · · · · · · · · · · · · · · · ·	·	мо	DAY	YEAR	
Mailing Address 917 Columb	oia Avenue					\$ 90.00
City Lancaster	State	Zip Code (Plus 4)	5	12	2014	
	PA	17603				
Full Name of Contributor Bev Susswein			МО	DAY	YEAR	
Mailing Address 3032 Village	e Drive					<b>\$</b> 180.00
City Center Valley	State	Zip Code (Plus 4)	5	12	2014	
	PA	18034				
Full Name of Contributor Constance Cowen			МО	DAY	YEAR	
Mailing Address 1600 Lehigl	h Pky E Apt 5F					<b>\$</b> 180.00
<b>City</b> Allentown	State	Zip Code (Plus 4)	5	12	2014	
, inches wi	PA	18103				
Full Name of Contributor Barbara Woodward			МО	DAY	YEAR	
Mailing Address 2803 Chew	Mailing Address 2803 Chew Street					<b>\$</b> 225.00
<b>City</b> Allentown	State	Zip Code (Plus 4)	5	12	2014	
- Allentown	PA	18104				
	·	<u> </u>	1	1		

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	me of Filing Committee or Candidate			g Period				
PLANNED PARENTHOOD PA INC			From:	<u>5/</u>	<u>6/2014</u>	То:		<u>6/9/2014</u>
				DA	TE		А	MOUNT
Full Name of Contributing Committee DEMOCRATIC LEADERSHIP PAC				мо	DAY	YEAR		
Mailing Address 3445 Butler Street	_			5	15	2014	\$	8,000.00
City PITTSBURGH	<b>State</b> PA	<b>Zip Code</b> 15201	e (Plus 4)	5	15	2014		
<b>Full Name of Contributing Committee</b> Friends of Erin Molchany				МО	DAY	YEAR		
Mailing Address 150 Bertha Street							\$	1,000.00
<b>City</b> Pittsburgh	<b>State</b> PA	<b>Zip Code</b> 15211	e (Plus 4)	5	15	2014		
								PAGE TOTAL
<b>Enter Grand Total of Part C on Sch</b>	edule I, Detailed S	Summary Pa	age, Sectio	n 3.			\$	0.000.00

9,000.00

## 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 C	ommittee or Candidate				Rep	orting Pe	riod					
PLANNED PARE	NTHOOD PA INC				Fror	m:	<u>5/6/2</u>	<u>014</u> To	<b>)</b> :	6/9/2014		
						DA	ATE		AN	MOUNT		
Full Name of Cor Yesenia Bane	ntributor					мо	DAY	YEAR				
Mailing Address	260 Cumberland Stre	eet							<b>\$</b>	1,387.81		
City Harribur	g	State	Zij	Code (Plus	4)	6	4	2014				
		PA	17	'102								
Employer Name	Unknown					Occupat	cion (	Jnknowi	n			
Employer Mailing Business	Address/Principal Plac	ce of		City		1	State		Zip Cod	e (Plus 4)		
Unknown				Harrisbur	g.		PA		17102			
Full Name of Cor Henry Hillman	ntributor					МО	DAY	YEAR				
Mailing Address	Unknown								\$	5,000.00		
City Unknown	า	State	Zij	p Code (Plus	4)	5	15	2014				
		PA	17	'102								
Employer Name	Unknown					Occupat	ion	Jnknowi	n			
Employer Mailing Business	Address/Principal Plac	ce of		City			State		Zip Code	e (Plus 4)		
Unknown				Unknown	ı		PA		17102			
Full Name of Cor	ntributor						DAY	VEAD				
Morgan Plant						МО	DAY	YEAR				
Mailing Address	322 S West Street								\$	450.00		
City Carlisle		State	Zij	Code (Plus	4)	5	12	2014	•			
		PA	17	'013								
Employer Name Self Employed				Occupation Unknown								
Employer Mailing Business	Address/Principal Plac	ce of		City		•	State		Zip Cod	e (Plus 4)		
322 S West Stre	eet			Carlisle			PA			17013		

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

PAGE TOTAL

6,837.81

\$

## 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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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> <b>To:</b>	<u>6/9/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	3,278.30
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	3,278.30

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					Re	portin	ng P	eriod				
PLANNED PARENTHOOD PA INC					Fro	m:		<u>5/6/201</u>	<u> 14</u> To:	6/9/2014		
								DATE		AMOUNT		
Full Name of Contributor PLANNED PARENTHOOD VOTES						мо		DAY	YEAR			
Mailing Address 434 W 33RD ST										<b>\$</b> 21.63		
City NEW YORK	State		Zip Code(I	Plus 4)			6	3	2014			
	NY		10001									
Employer of Contributor PLANNED P	ARENTHOO	D VOTE	5			Occu	upat	ci <b>on</b>	on profit	on profit organization		
Employer Mailing Address/Principal Place of Business City State							Zip(	Code(Plus	Description of Contribution			
434 W 33rd Street New York			NY		10		10001		expenses			
Full Name of Contributor PLANNED PARENTHOOD VOTES						мо		DAY	YEAR			
Mailing Address 434 W 33RD ST						_ 5				<b>\$</b> 1,613.02		
City NEW YORK	State NY		Zip Code(I 10001	Plus 4)			5	31	2014			
Employer of Contributor PLANNED P	ARENTHOO	D VOTE	<u> </u> 			Occupation non profit organization						
Employer Mailing Address/Principal Plac Business	e of	City		State			Zip(	Code(Plus	Descri	ption of Contribution		
434 W 33rd Street		New Yo	ork	NY			100	01	Staff ti	ime donated		
Full Name of Contributor PLANNED PARENTHOOD VOTES						мо	DAY		YEAR			
Mailing Address 434 W 33RD ST										<b>\$</b> 778.02		
City NEW YORK	State NY		<b>Zip Code(I</b> 10001	Plus 4)			5	17	2014			
Employer of Contributor PLANNED PARENTHOOD VOTES						Осси	Occupation non			on profit organization		
Employer Mailing Address/Principal Plac Business	e of	City		State				Code(Plus	Description of Contribution			
434 W 33rd Street		New Yo	ork	NY		<b>4)</b> 10001			Staff time donated			

								- 15	
Full Name of Contributor PLANNED PARENTHOOD VOTES				МО	DAY	YEAR			
Mailing Address 434 W 33RD	) ST							<b>\$</b> 15.65	
City NEW YORK	State	State		Zip Code(Plus 4)		12	2014		
	NY		10001						
Employer of Contributor PLA	ANNED PARENTHOO	DD VOTE	S		Occupa	i <b>tion</b>	on profit	organization	
Employer Mailing Address/Principal Place of Business		City State		Zip 4)	Zip Code(Plus 4)		Description of Contribution		
434 W 33rd Street		New Y	ork	NY	10	10001 travel		expenses	
Full Name of Contributor PLANNED PARENTHOOD VOTES					МО	DAY	YEAR		
Mailing Address 434 W 33RD	) ST							<b>\$</b> 849.98	
City NEW YORK	State	Zip Code		Plus 4)	5	29 2014			
	NY		10001						
Employer of Contributor PLA	ANNED PARENTHOO	DD VOTE	S		Occupa	<b>ition</b>	on profit		
Employer Mailing Address/Principal Place of Business		City		State	Zip 4)	Zip Code(Plus 4)		Description of Contribution	
434 W 33rd Street		New Y	ork	NY	staff time with media tracking				
Enter Grand Total of Part G	on Schedule II	In-Kind	Contributi	ons Detail	led			PAGE TOTAL	
Summary Page, Section 3.	on ocheque 11,	Kiiiu		ons becan				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>	То:	<u>6/9/2014</u>		

				DATE		AMOUNT		
To Whom Paid Ampersand Consulting			мо	DAY	YEAR			
Mailing Address 3445 Butler Street, Suite 101			5	7	2014	\$	14,000.00	
<b>City</b> Pittsburg	State         Zip Code (Plus 4)           PA         15201			Description of Expenditure Consultant				
To Whom Paid Planned Parenthood Keystone			МО	DAY	YEAR			
Mailing Address PO Box 813			5	20	2014	\$	1,359.35	
City Trexlertown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18087	Description of Expenditure Reimbursement					
To Whom Paid Bryn Mawr College			МО	DAY	YEAR			
Mailing Address 101 N Merion Ave			6	4	2014	\$	163.50	
City Bryn Mawr	State Zip Code (Plus 4) PA 19010			Description of Expenditure Space Rental				
<b>To Whom Paid</b> Stephen Latanishen			МО	DAY	YEAR			
Mailing Address 103 Gingrich Drive			6	4	2014	\$	157.08	
City Lititz	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17543	Description of Expenditure Reimbursement					
To Whom Paid Linsey Gingrich			МО	DAY	YEAR			
Mailing Address 11 South Pitt Street			6	6	2014	\$	138.71	
<b>City</b> Carlisle	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17013	Description of Expenditure Reimbursement					

To Whom Paid Friends of Molchany			мо	DAY	YEAR		
Mailing Address PO Box 6	0122		6	9	2014	\$	1,500.00
<b>City</b> Pittsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15211	Description of Expenditure  Donation				
<b>To Whom Paid</b> Planned Parenthood PA Advo	cates		МО	DAY	YEAR		
Mailing Address 1514 N 2	nd Street		6	6	2014	\$	203.67
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17102	Description of Expenditure Reimbursment				
<b>To Whom Paid</b> TransFirst LLC			МО	DAY	YEAR		
Mailing Address Unknown			5	12	2014	\$	20.00
<b>City</b> Unknown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17102	Description of Expenditure Bank Fee's				
<b>To Whom Paid</b> Planned Parenthood PA Advo	cates		мо	DAY	YEAR		
Mailing Address 1514 N 2nd Street			5	12	2014	\$	203.67
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17102	Description of Expenditure Reimbursment				
Enter Grand Total of Even	nditures on Page 1. Pa	uport Cover Page Item D					PAGE TOTAL
Enter Grand Total of Expe	nunures on Page 1, Re	port cover Page, Item D	<b>'-</b>			\$	17,745.98