

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 POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	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			
		11	25	2014		12	31	2014				
A. Amount Brought Forward From Last Report						\$ 97,751.00						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 9,525.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 107,276.00						
D. Total Expenditures (From Schedule III)						\$ 25,418.28						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 81,857.72						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
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>11/25/2014</u> To: <u>12/31/2014</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 675.00

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)	\$ 1,050.00
TOTAL for the Reporting Period (2)	\$ 1,050.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 0.00
All Other Contributions (Part D)	\$ 7,800.00
TOTAL for the Reporting Period (3)	\$ 7,800.00

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.)	\$ 9,525.00
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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
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Full Name of Contributing Committee	MO	DAY	YEAR	\$0.00
Mailing Address				
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>11/25/2014</u> To: <u>12/31/2014</u>
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DATE				AMOUNT	
Full Name of Contributor Edward Feinstein				MO	DAY
Mailing Address				YEAR	
City Pittsburgh	State PA	Zip Code (Plus 4) 15217	12	30	2014
				\$ 100.00	
Full Name of Contributor Leah Yocum				MO	DAY
Mailing Address				YEAR	
City Honey Brook	State PA	Zip Code (Plus 4) 19344	12	30	2014
				\$ 100.00	
Full Name of Contributor Paula Bussard				MO	DAY
Mailing Address				YEAR	
City Carlisle	State PA	Zip Code (Plus 4) 17015	12	30	2014
				\$ 200.00	
Full Name of Contributor Kenneth Mohr Jr				MO	DAY
Mailing Address				YEAR	
City Coopersburg	State PA	Zip Code (Plus 4) 18036	12	23	2014
				\$ 100.00	
Full Name of Contributor Jonathan Baron				MO	DAY
Mailing Address				YEAR	
City Philadelphia	State PA	Zip Code (Plus 4) 19146	12	23	2014
				\$ 100.00	
Full Name of Contributor Clyde A Strang				MO	DAY
Mailing Address				YEAR	
City York	State PA	Zip Code (Plus 4) 17403	12	16	2014
				\$ 200.00	
Full Name of Contributor Brigitte Trevidic				MO	DAY
Mailing Address				YEAR	
City Merion	State PA	Zip Code (Plus 4) 19066	12	16	2014
				\$ 250.00	

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

PAGE TOTAL

\$ 1,050.00

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	Reporting Period
	From: To:

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

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

PAGE TOTAL	
\$	0.00

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>11/25/2014</u> To: <u>12/31/2014</u>
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				DATE			AMOUNT
Full Name of Contributor Georgia Berner				MO	DAY	YEAR	\$ 6,000.00
Mailing Address				12	16	2014	
City Zelienople	State PA	Zip Code (Plus 4) 16063					
Employer Name unknown				Occupation unknown			
Employer Mailing Address/Principal Place of Business			City Zelienople		State PA		Zip Code (Plus 4) 16063
Full Name of Contributor Richard Kasher				MO	DAY	YEAR	\$ 300.00
Mailing Address				12	30	2014	
City Villanova	State PA	Zip Code (Plus 4) 19085					
Employer Name unknown				Occupation unknown			
Employer Mailing Address/Principal Place of Business			City Villanova		State PA		Zip Code (Plus 4) 19085
Full Name of Contributor Susan Hagan				MO	DAY	YEAR	\$ 1,500.00
Mailing Address				12	30	2014	
City Erie	State PA	Zip Code (Plus 4) 16506					
Employer Name unknown				Occupation unknown			
Employer Mailing Address/Principal Place of Business			City Erie		State PA		Zip Code (Plus 4) 16506

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

PAGE TOTAL
\$ 7,800.00

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:
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			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>11/25/2014</u> To: <u>12/31/2014</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)		\$	0.00
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.)		\$	0.00

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
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
PLANNED PARENTHOOD PA INC	From <u>11/25/2014</u> To: <u>12/31/2014</u>

				DATE		AMOUNT		
To Whom Paid				MO	DAY	YEAR		
Sari Stevens								
Mailing Address				12	29	2014	\$ 124.44	
City	Harrisburg	State	PA	Zip Code (Plus 4)		17102		Description of Expenditure
								Expense Reimbursement
To Whom Paid				MO	DAY	YEAR		
Sarah Boateng								
Mailing Address				12	23	2014	\$ 509.22	
City	Harrisburg	State	PA	Zip Code (Plus 4)		17110		Description of Expenditure
								Expense Reimbursement
To Whom Paid				MO	DAY	YEAR		
Events by Nicholas Caterers								
Mailing Address				12	15	2014	\$ 201.70	
City	Cherry Hill	State	NJ	Zip Code (Plus 4)		08002		Description of Expenditure
								Caterer for Event
To Whom Paid				MO	DAY	YEAR		
Talia Ramo								
Mailing Address				12	15	2014	\$ 104.47	
City	Allentown	State	PA	Zip Code (Plus 4)		18102		Description of Expenditure
								Expense reimbursement
To Whom Paid				MO	DAY	YEAR		
Gwen Emmons								
Mailing Address				12	8	2014	\$ 6,000.00	
City	Philadelphia	State	PA	Zip Code (Plus 4)		19130		Description of Expenditure
								Additional PAC work
To Whom Paid				MO	DAY	YEAR		
Carole Brode								
Mailing Address				12	5	2014	\$ 162.50	
City	Harrisburg	State	PA	Zip Code (Plus 4)		17102		Description of Expenditure
								Event Artist

To Whom Paid			MO	DAY	YEAR	\$ 6,000.00
Sarah Boateng						
Mailing Address			12	1	2014	
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Additional PAC work			
To Whom Paid			MO	DAY	YEAR	\$ 6,000.00
Aleigha Cavalier						
Mailing Address			12	1	2014	
City Pittsburgh	State PA	Zip Code (Plus 4) 15219	Description of Expenditure Additional PAC work			
To Whom Paid			MO	DAY	YEAR	\$ 33.00
Capital Copy Service						
Mailing Address			11	28	2014	
City harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Print job			
To Whom Paid			MO	DAY	YEAR	\$ 37.50
Mary Mazziotti						
Mailing Address			11	25	2014	
City harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure Event artist			
To Whom Paid			MO	DAY	YEAR	\$ 25.00
Action Without Borders						
Mailing Address			11	25	2014	
City New York	State NY	Zip Code (Plus 4) 10001	Description of Expenditure Employment Ad			
To Whom Paid			MO	DAY	YEAR	\$ 31.91
Transfirst LLC						
Mailing Address			12	10	2014	
City unknown	State PA	Zip Code (Plus 4) 17102	Description of Expenditure Bank/CC fee's			
To Whom Paid			MO	DAY	YEAR	\$ 203.67
Planned Parenthood PA Advocates						
Mailing Address			12	10	2014	
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure office allocation			
To Whom Paid			MO	DAY	YEAR	\$ 5,981.87
Planned Parenthood PA Advocates						
Mailing Address			12	10	2014	
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure salary allocation			

To Whom Paid Wells Fargo			MO	DAY	YEAR	\$ 3.00
Mailing Address			12	8	2014	
City unknown	State PA	Zip Code (Plus 4) 17102	Description of Expenditure online dep detail & image			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 25,418.28

