

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	✓	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.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes No ✓
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes No ✓
	ANNUAL REPORT	7.	Year 2018	FILING METHOD () CHECK ONE		PAPER	✓	DISKETTE
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code
				MO	DAY	YEAR		
				11	6	2018		(SEE INSTRUCTIONS FOR CODES)
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR
		3	27	2018	TO	4	30	2018
A. Amount Brought Forward From Last Report				\$ 243,882.03				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 4,673.36				
C. Total Funds Available (Sum Of Lines A and B)				\$ 248,555.39				
D. Total Expenditures (From Schedule III)				\$ 5,639.23				
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 242,916.16				
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>3/27/2018</u> To: <u>4/30/2018</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 133.36

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)	\$ 1,570.00
TOTAL for the Reporting Period (2)	\$ 1,570.00

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)	\$ 2,970.00
TOTAL for the Reporting Period (3)	\$ 2,970.00

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.)	\$ 4,673.36
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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>3/27/2018</u> To: <u>4/30/2018</u>			
				DATE		AMOUNT	

Full Name of Contributor Christine jacobs			MO	DAY	YEAR	\$ 90.00
Mailing Address 240 Spruce Street			3	29	2018	
City Philadelphia	State PA	Zip Code (Plus 4) 19106				

Full Name of Contributor Cynthia Chuang			MO	DAY	YEAR	\$ 240.00
Mailing Address 340 E Chocolate Avenue			3	29	2018	
City Hershey	State PA	Zip Code (Plus 4) 17033				

Full Name of Contributor Morgan Plant			MO	DAY	YEAR	\$ 90.00
Mailing Address 322 S West Street			3	29	2018	
City Carlisle	State PA	Zip Code (Plus 4) 17013				

Full Name of Contributor Jessica Brittain			MO	DAY	YEAR	\$ 90.00
Mailing Address 6805 Old Berwick road			3	29	2018	
City Bloomsburg	State PA	Zip Code (Plus 4) 17815				

Full Name of Contributor Helen Bosley			MO	DAY	YEAR	\$ 90.00
Mailing Address 546 Palmer Farm Drive			3	29	2018	
City Yardley	State PA	Zip Code (Plus 4) 19067				

Full Name of Contributor James Dillard			MO	DAY	YEAR	\$ 90.00
Mailing Address 106 Old Railroad Lane			3	29	2018	
City Port Matilda	State PA	Zip Code (Plus 4) 16870				

Full Name of Contributor Morgan Plant			MO	DAY	YEAR	\$ 90.00
Mailing Address 322 S West Street			3	29	2018	
City Carlisle	State PA	Zip Code (Plus 4) 17013				

Full Name of Contributor Judith L Schwank			MO	DAY	YEAR	\$ 90.00
Mailing Address 169 Stitzer Road			3	29	2018	
City Fleetwood	State PA	Zip Code (Plus 4) 19522				

Full Name of Contributor Thomas Grumbacher			MO	DAY	YEAR	\$ 100.00
Mailing Address 2055 Rosewood Lane			4	25	2018	
City York	State PA	Zip Code (Plus 4) 17403				

Full Name of Contributor Christine Jacobs			MO	DAY	YEAR	\$ 90.00
Mailing Address 240 Spruce Street			4	30	2018	
City Philadelphia	State PA	Zip Code (Plus 4) 19106				

Full Name of Contributor helen Bosley			MO	DAY	YEAR	\$ 90.00
Mailing Address 546 Palmer Farm Drive			4	30	2018	
City Yardley	State PA	Zip Code (Plus 4) 19067				

Full Name of Contributor James Dillard			MO	DAY	YEAR	\$ 90.00
Mailing Address 106 Old Railroad lane			4	30	2018	
City Port Matilda	State PA	Zip Code (Plus 4) 16870				

Full Name of Contributor Jessica Brittain			MO	DAY	YEAR	\$ 90.00
Mailing Address 6805 Old Berwick Road			4	30	2018	
City Bloomsburg	State PA	Zip Code (Plus 4) 17815				

Full Name of Contributor Cynthia Chuang			MO	DAY	YEAR	\$ 240.00
Mailing Address 340 E Chocolate Avenue			4	30	2018	
City Hershey	State PA	Zip Code (Plus 4) 17033				

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

PAGE TOTAL

\$ 1,570.00

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>3/27/2018</u> To: <u>4/30/2018</u>
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				DATE		AMOUNT	
Full Name of Contributor Bynthia Jimenez				MO	DAY	YEAR	\$ 390.00
Mailing Address 932 Franklin Street				4	30	2018	
City Wyomissing	State PA	Zip Code (Plus 4) 19610					
Employer Name Unknown				Occupation Unknown			
Employer Mailing Address/Principal Place of Business Unknown			City Wyomissing		State PA		Zip Code (Plus 4) 19610
Full Name of Contributor Leone E.G. Schoenberg				MO	DAY	YEAR	\$ 290.00
Mailing Address 1400 Waverly Road, Apt B227				4	30	2018	
City Gladwyne	State PA	Zip Code (Plus 4) 19035					
Employer Name Unknown				Occupation Unknown			
Employer Mailing Address/Principal Place of Business Unknown			City Gladwyne		State PA		Zip Code (Plus 4) 19035
Full Name of Contributor Susanne Wean				MO	DAY	YEAR	\$ 300.00
Mailing Address 280 Millview Drive				4	26	2018	
City Pittsburgh	State PA	Zip Code (Plus 4) 15238					
Employer Name Unknown				Occupation Unknown			
Employer Mailing Address/Principal Place of Business Unknown			City Pittsburgh		State PA		Zip Code (Plus 4) 15238

Full Name of Contributor Brian Baxter			MO	DAY	YEAR	\$ 1,990.00
Mailing Address 800 Admirals Way #1181			3	29	2018	
City Philadelphia	State PA	Zip Code (Plus 4) 19146				
Employer Name Unknown			Occupation Unknown			
Employer Mailing Address/Principal Place of Business Unknown		City Philadelphia	State PA	Zip Code (Plus 4) 19146		

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

PAGE TOTAL
\$ 2,970.00

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>3/27/2018</u> To: <u>4/30/2018</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:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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>3/27/2018</u> To: <u>4/30/2018</u>

DATE				AMOUNT
To Whom Paid Planned Parenthood PA Advocates	MO	DAY	YEAR	
Mailing Address 1514 N 2nd Street	4	26	2018	\$ 60.00
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure PAC portion of CC chgs	
To Whom Paid Planned Parenthood PA Advocates	MO	DAY	YEAR	
Mailing Address 1514 N 2nd Street	4	4	2018	\$ 1,145.07
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure March salary allocation	
To Whom Paid Planned Parenthood PA Advocates	MO	DAY	YEAR	
Mailing Address 1514 N 2nd Street	4	3	2018	\$ 133.53
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure monthly office allocation	
To Whom Paid Planned Parenthood PA Advocates	MO	DAY	YEAR	
Mailing Address 1514 N 2nd Street	4	3	2018	\$ 1,050.63
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure march salary allocation	
To Whom Paid Friends of Mary Jo Daley	MO	DAY	YEAR	
Mailing Address PO Box 752	4	24	2018	\$ 500.00
City Conshohocken	State PA	Zip Code (Plus 4) 19428	Description of Expenditure Donation	

To Whom Paid PA HDCC			MO	DAY	YEAR	
Mailing Address PO Box 555			4	10	2018	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure DOnation			

To Whom Paid Friends of Carolyn Comitta			MO	DAY	YEAR	
Mailing Address 117 W Gay Street, Box 156			4	4	2018	
City West Chester	State PA	Zip Code (Plus 4) 19380	Description of Expenditure Donation			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 5,639.23

