

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 :		20180278		Report Filed By :		CANDIDATE		COMMITTEE		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: PLANNED PARENTHOOD PENNSYLVANIA VOTES													
Street Address: 1514 N. 2ND ST													
City: HARRISBURG						State: PA				Zip Code: 17102			
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	✓			
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	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	Party Code	County Code	
						MO	DAY	YEAR					
						11	6	2018					
Summary of Receipts and Expenditures from:						MO	DAY	YEAR	FOR OFFICE USE ONLY				
						10	23	2018					
						11	26	2018					
A. Amount Brought Forward From Last Report						\$ 499,915.30							
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 10,000.00							
C. Total Funds Available (Sum Of Lines A and B)						\$ 509,915.30							
D. Total Expenditures (From Schedule III)						\$ 380,636.12							
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 129,279.18							
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 PENNSYLVANIA VOTES	From: <u>10/23/2018</u> To: <u>11/26/2018</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 0.00

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)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 0.00

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)	\$ 10,000.00
TOTAL for the Reporting Period (3)	\$ 10,000.00

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.)	\$ 10,000.00
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<div>PART A</div> <div>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</div> <div>\$50.01 TO \$250.00</div> <div>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.</div>	
Name of Filing Committee or Candidate	Reporting Period
	From: To:
DATEAMOUNT	

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

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)					

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

PAGE TOTAL	
\$	0.00

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 PENNSYLVANIA VOTES	Reporting Period From: <u>10/23/2018</u> To: <u>11/26/2018</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Planned Parenthood Action Fund							
Mailing Address 1110 Vermont Ave NW				10	25	2018	\$ 10,000.00
City Washington	State DC	Zip Code (Plus 4) 20005					
Employer Name Planned Parenthood Action Fund				Occupation Action Fund			
Employer Mailing Address/Principal Place of Business 1110 Vermont Ave NW			City Washington		State DC	Zip Code (Plus 4) 20005	

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

PAGE TOTAL
\$ 10,000.00

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:

			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 PENNSYLVANIA VOTES		From: <u>10/23/2018</u> To: <u>11/26/2018</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 III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
PLANNED PARENTHOOD PENNSYLVANIA VOTES	From <u>10/23/2018</u> To: <u>11/26/2018</u>

DATE				AMOUNT		
To Whom Paid Wells Fargo			MO	DAY	YEAR	\$ 15.00
Mailing Address Unknown			10	25	2018	
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure wire service charge			
To Whom Paid Deliver Strategies			MO	DAY	YEAR	\$ 9,525.04
Mailing Address PO Box 100970			11	1	2018	
City Arlington	State VA	Zip Code (Plus 4) 22210	Description of Expenditure printing/distribution			
To Whom Paid PP Assoc. of PA			MO	DAY	YEAR	\$ 465.00
Mailing Address 1514 N 2nd Street			11	2	2018	
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure expense reimbursement			
To Whom Paid Community Outreach Group			MO	DAY	YEAR	\$ 285,251.08
Mailing Address 1021 Piedmont Avenue NE			10	24	2018	
City Palm Bay	State FL	Zip Code (Plus 4) 32907	Description of Expenditure contracted services			
To Whom Paid Blueprint Interactive			MO	DAY	YEAR	\$ 74,000.00
Mailing Address 1730 Rhode Island Avenue, NW			10	24	2018	
City Washington	State DC	Zip Code (Plus 4) 20036	Description of Expenditure advertising			

To Whom Paid Lehigh Valley Apparel Creations			MO	DAY	YEAR	\$ 1,755.00
Mailing Address 513 S Clewell Street			10	24	2018	
City Bethlehem	State PA	Zip Code (Plus 4) 18015	Description of Expenditure tshirts			

To Whom Paid Project Keystone			MO	DAY	YEAR	\$ 9,625.00
Mailing Address 230 S Broad Street, Fl 17			10	23	2018	
City Philadelphia	State PA	Zip Code (Plus 4) 19102	Description of Expenditure Research License Package T			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 380,636.12

