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 94	400274				Rep File			CANI	DIE	DATE		COM	4ITTEE	✓	LOB	BYIS	Т	
Name of Filing C	ommittee, Can	didate or	Lob	byist:		PLAN	INE	D PAI	RENTHO	00	D PA	INC						•	
Street Address:																			
City:	HARRISBU	RG							State:		PA			Zip Cod	le: 17	7102-2505			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		ND FRIDAY RIMARY	PRE-	2		30 DA		P	OST-	3.		AMENDM REPORT?	Yes		No	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X		ND FRIDAY	/ PRE	- 5		30 DA		Р	OST-	Т- 6.		TERMINATION REPORT?		Yes		No	\
report type)	ANNUAL REPO	PRT 7.	Y	'ear 2020					NG MET		_			PAPER			DIS	KETTE	
Name of Office S	ought by Cand	idate:							DATE	OI	F ELE	СТІС	N	District Number	Office Code	Pai	rty Co	de Cou	
									МО		DAY	YI	EAR			I			
									1	l 1		3	2020		(SEE INS	TRUCTI	ONS F	OR CODE	S)
Summary of		МО		DAY	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONI	.Υ	
Expenditures from: 6 23 202							T	0		9		L4	2020						
A. Amount Brought Forward From Last Report								\$	_			118,	024.85						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 64,108.40																			
C. Total Funds Available (Sum Of Lines A and B) \$ 182,133.25																			
D. Total Expenditures (From Schedule III) \$ 11,610.01																			
E. Ending Cash	Balance (Subt	ract Line	D Fr	om Line C	:)			\$			1	.70,5	23.24						
F. Value Of In-	Kind Contributi	ions Rece	eived	(From So	hedul	e II))	\$					0.00						
G. Unpaid Debt	s And Obligation	ons (Fron	n Sch	hedule IV)			\$					0.00		,				
					AFF:	IDA	VI	T SE	CTIO	V									
PART I - If this is				_											e •	.1		-1:-6 4	
I swear (or affirm) correct and comple		including	tne at	ttacned Sch	ledules	mea	on	рарег	ог ву еге	cur	onic m	earum	i, are to t	ne best o	г ту кноч	vieage	anu i	eller , t	rue
Sworn to and subs	cribed before me day of	this	2	20						-		5	Signature	of Perso	n Submitt	ing Re	port		
	Sigr	nature						-		-				Prin	ted Name				
My Commission Ex	rpires							_						Emai	il				
	МО		DAY		YR						Are	a Co	de	Daytim	e Teleph	one Nu	mber		Ш
Part II- If this is	a report of a c	andidate	's au	uthorized (Comm	ittee	, C	andid	ate sha	II s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my kno	wledg	ge and belie	ef this	politi	cal	comm	ittee has	s no	ot viola	ed ar	ny provis	ions of the	e act of Ju	ine 3,1	937 (P.L. 133	33,
Sworn to and subsc	ribed before me t day of	this	_	20									s	ignature o	of Candida	ite			_
			²	20				-						Printe	d Name				-
	Signatu	ıre						-		_									_
My Commission Exp	ires													Ema	il				
	МО		DAY	,	YR			•			Area	Code		Da	ytime Te	elephor	ne Nu	mber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
PLANNED PARENTHOOD PA INC	From:	6/23/202	<u>0</u> To:	9/14/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	39,858.40
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)			\$	2,350.00
TOTAL for the Reporting	J Period	(2)	\$	2,350.00
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)			\$	21,900.00
TOTAL for the Reporting	J Period	(3)	\$	21,900.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
			I	
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	64,108.40

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 Candidat	e		Reporting	Period			
		1	From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address		_				\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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)

Reporting Period Name of Filing Committee or Candidate PLANNED PARENTHOOD PA INC From: 6/23/2020 To: 9/14/2020 DATE **AMOUNT Full Name of Contributor** МО DAY YEAR Bonnie Scheer TTEE **Mailing Address** 100.00 City Poughkeepsie State Zip Code (Plus 4) 2020 NY 12603 **Full Name of Contributor** МО DAY YEAR Friends of Ken Lawrence **Mailing Address** 250.00 9 2020 State Zip Code (Plus 4) City Fort Washington PA 19034 **Full Name of Contributor** мо DAY YEAR Caroline W Rasner **Mailing Address** 100.00 2020 City State Zip Code (Plus 4) 9 2 Philadelphia PΑ 19146 **Full Name of Contributor** МО DAY YEAR Frances N Beer **Mailing Address** 100.00 9 2 2020 City Kennett Square State Zip Code (Plus 4) PA 19348 **Full Name of Contributor** МО DAY YEAR Susan Laskin **Mailing Address** 100.00 2020 City State Zip Code (Plus 4) 9 2 Berwyn PA 19312 **Full Name of Contributor** МО DAY YEAR Alison B Post **Mailing Address** 100.00 2020 2 9 Allentown State Zip Code (Plus 4) PA 18104 **Full Name of Contributor** МО DAY **YEAR** Zelia T McDowell **Mailing Address** 100.00 2020 City 9 2 Jenkintown State Zip Code (Plus 4) PA 19046

Full N	ame of Contributor			МО	DAY	VEAD	
Joan I	R Moore			МО	DAY	YEAR	
Mailin	g Address					İ	\$ 100.00
City	Elverson	State	Zip Code (Plus 4)	9	2	2020	
		PA	19520				
Full N	ame of Contributor	•	•				
Becky	Ann Bartlett			МО	DAY	YEAR	
Mailin	g Address						\$ 100.00
City	Nazareth	State	Zip Code (Plus 4)	9	2	2020	
		PA	18064				
Full N	ame of Contributor		•				
Joan I	P Wohl			МО	DAY	YEAR	
Mailin	g Address						\$ 100.00
City	Philadelphia	State	Zip Code (Plus 4)	9	2	2020	
		PA	19103				
Full N	ame of Contributor	•	•			\ 	
Janice	e Taylor Gordon			МО	DAY	YEAR	
Mailin	g Address						\$ 100.00
City	Radnor	State	Zip Code (Plus 4)	9	2	2020	
		PA	19087				
Full N	ame of Contributor	·		МО	DAY	VEAD	
harrie	t Zilber			МО	DAY	YEAR	
Mailin	g Address						\$ 100.00
City	Merion Station	State	Zip Code (Plus 4)	9	2	2020	
		PA	19066				
Full N	ame of Contributor	-		мо	DAY	YEAR	
yvonn	ne Marie Albright			1-10	DAI	LAK	
Mailin	g Address						\$ 100.00
City	Pottstown	State	Zip Code (Plus 4)	9	2	2020	
		PA	19464				
Full N	ame of Contributor			мо	DAY	YEAR	
Marx	S Leopold			140	DAT	TEAR	
Mailin	g Address						\$ 100.00
City	Villanova	State	Zip Code (Plus 4)	9	2	2020	
		PA	19085				
Full N	ame of Contributor			мо	DAY	YEAR	
Judy I	F Berkman			MO	DAY	TEAR	
Mailin	g Address						\$ 100.00
City	Philadelphia	State	Zip Code (Plus 4)	9	2	2020	
		PA	19118				
Full N	ame of Contributor			Ma	DAY	VESS	
Helen	P Turnbull			МО	DAY	YEAR	
	g Address						\$ 100.00
City	Hatboro	State	Zip Code (Plus 4)	9	2	2020	
		PA	19040				
		•		•		•	•

Full Name of Contributor						
Alicia R Macarthur Trust			МО	DAY	YEAR	
Mailing Address						\$ 100.00
City Gwynedd	State	Zip Code (Plus 4)	9	2	2020	100.00
,	PA	19436				
Full Name of Contributor			мо	DAY	YEAR	
Letty D Thall			1-10	DAI	IZAK	
Mailing Address			_			\$ 100.00
City Philadelphia	State	Zip Code (Plus 4)	9	2	2020	
	PA	19130				
Full Name of Contributor			мо	DAY	YEAR	
Diane D harrison						
Mailing Address			_			\$ 200.00
City Philadlephia	State	Zip Code (Plus 4)	9	2	2020	
	PA	19106				
Full Name of Contributor			мо	DAY	YEAR	
Marcia Ensinger Chernoff			1-10	DAI	ILAK	
Mailing Address						\$ 100.00
City Rydal	State	Zip Code (Plus 4)	9	2	2020	
	PA	19046				
Full Name of Contributor			мо	DAY	YEAR	
Ruth Ann Dombkoski			1-10		IZAK	
Mailing Address						\$ 100.00
City Chadds Ford	State	Zip Code (Plus 4)	9	2	2020	
	PA	19317				

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

PAGE TOTAL\$ 2,350.00

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	me of Filing Committee or Candidate								
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	age, Sectio	n 3.			\$	(0.00

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 Committee or Candidate	ame of Filing Committee or Candidate Rep				porting Period						
PLANNED PARENTHOOD PA INC				Fron	n:	6/23/2	<u>020</u> To	o: <u>9/14/2020</u>			
					DA	ATE		АМО	DUNT		
Full Name of Contributor					мо	DAY	YEAR				
Helen R Bosley					МО	DAT	ILAK	\$	600.00		
Mailing Address					9	2	2020	7			
City Yardley	State	Zip	Code (Plus	4)	9	۷	2020				
	PA	19	067								
Employer Name Unknown					Occupat	ion	Unknow	n			
Employer Mailing Address/Principal Plac	e of Business		City			(Plus 4)					
			Yardley			PA		19067			
Full Name of Contributor											
Roger Even Bove				МО	DAY	YEAR	\$	300.00			
Mailing Address					_		1				
City West Chester	State	Zip	Code (Plus	4)	9	2	2020				
	PA	19	380								
Employer Name Unknown					Occupat	ion	Unknow	n			
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Code	(Plus 4)		
			West Ches	ter	PA			19380			
Full Name of Contributor		!				1		T			
Full Name of Contributor					МО	DAY	YEAR	\$	500.00		
Sally Ann Wood								-			
Mailing Address	Chaha	7:-	Cada (Diva	4)	9	2	2020				
City Devon	State	_	Code (Plus	4)							
	PA	19	333					ı			
Employer Name Unknown					Occupation Unknown						
					Occupat	1	Unknow				
Employer Mailing Address/Principal Plac	e of Business		City		Occupat	State	Unknow	Zip Code	(Plus 4)		
Employer Mailing Address/Principal Plac	e of Business		City Devon		Occupat	1	Unknow		(Plus 4)		
Employer Mailing Address/Principal Plac	e of Business		-			State PA		Zip Code 19333			
Full Name of Contributor Leanne C Wagner	e of Business		-		MO MO	State	Unknow YEAR	Zip Code	(Plus 4) 3,000.00		
Full Name of Contributor	e of Business		-			State PA DAY	YEAR	Zip Code 19333			
Full Name of Contributor Leanne C Wagner	e of Business	Zip	-	4)	МО	State PA		Zip Code 19333			
Full Name of Contributor Leanne C Wagner Mailing Address		_	Devon	4)	МО	State PA DAY	YEAR	Zip Code 19333			
Full Name of Contributor Leanne C Wagner Mailing Address	State	_	Devon	4)	МО	State PA DAY	YEAR	Zip Code 19333			
Full Name of Contributor Leanne C Wagner Mailing Address City Philadelphia	State PA	_	Devon	4)	MO 9	State PA DAY	YEAR 2020	Zip Code 19333	3,000.00		

YEAR 2020 Unknow YEAR 2020	n Zip Code (F 19462 \$	1,000.00 Plus 4)
2020 Unknow YEAR	n Zip Code (F 19462	Plus 4)
Unknow	n Zip Code (F 19462 \$	
Unknow	n Zip Code (F 19462 \$	
YEAR	Zip Code (F 19462	
YEAR	Zip Code (F 19462	
	\$	
	\$	
	\$	1,000.00
	1	1,000.00
2020	1	
2020	1	
<u>' </u>	<u>'</u>	
Unknow		N 4)
	Zip Code (F	Plus 4)
	19425	
YEAR		500.00
	*	300.00
2020		
Unknow	n	
	Zip Code (F	Plus 4)
	18020	
YEAR	\$	500.00
2020	7	
2020		
Unknow	n	
		Plus 4)
	19103	•
	T	
YEAR	\$	1,000.00
YEAR	\$	1,000.00
YEAR 2020	-	1,000.00
	-	1,000.00
2020		1,000.00
	n	
2020	n Zip Code (F	
2020	n	
2020	n Zip Code (F 19119	Plus 4)
2020 Unknow	n Zip Code (F	
2020 Unknow	n Zip Code (F 19119	Plus 4)
2020 Unknow YEAR	n Zip Code (F 19119	Plus 4)
2020 Unknow YEAR	n Zip Code (F 19119	Plus 4)
2020 Unknow YEAR	n Zip Code (F 19119 \$	Plus 4)
2020 Unknow YEAR 2020	n Zip Code (F 19119 \$	1,000.00
	2020 Unknow YEAR 2020	19425 YEAR \$ 2020 Unknown Zip Code (I 18020 YEAR \$ 2020 Unknown Zip Code (I

Full Name of Contributor								
Peggy Curchack				МО	DAY	YEAR	\$	500.00
Mailing Address							1	
City Philadelphia	State	Zij	Code (Plus 4)	9	2	2020		
1 made.pma	PA		103					
Employer Name Unknown			103	Occupat	ion I	Jnknow	n	
Employer Mailing Address/Principal Plac	e of Business		City	Тосстви	State	Jinkilow		(Plus 4)
	- C. 240		Philadelphia		PA		19103	(1.120-1)
E-II Name of Combillation			Tilliaacipilia		117		T T T T T T T T T T T T T T T T T T T	
Full Name of Contributor				мо	DAY	YEAR	\$	1,000.00
Mary Elizabeth Salandria							1	
Mailing Address City Philadelphia	State	711	o Code (Plus 4)	9	2	2020		
City Philadelphia		_						
Employer Name 11.1	PA I	19	103	0			'	
Employer Name Unknown				Occupat	T	Jnknow		(5)
Employer Mailing Address/Principal Plac	e of Business		City		State		-	(Plus 4)
			Philadelphia		PA		19103	
Full Name of Contributor				мо	DAY	YEAR	 \$	10,000.00
Leslie Ane Miller]	10,000.00
Mailing Address				9	2	2020		
City Bryn Mawr	State	Zij	Code (Plus 4)					
	PA I	19	010	l			l	
Employer Name Unknown				Occupat	ion (Jnknow	n	
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	(Plus 4)
			Bryn Mawr		PA		19010	
Full Name of Contributor				мо	DAY	YEAR		
Marion Layton Mann				МО	DAY	TEAK	\$	1,000.00
Mailing Address				9	2	2020	1	
City Rosemont	State	Zij	Code (Plus 4)	9	2	2020		
	PA I	19	010					
Employer Name Unknown	Employer Name Unknown				ion (Jnknow	n	
			State Zip Code (Plus 4)					
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	(Plus 4)
Employer Mailing Address/Principal Plac	e of Business		City Rosemont		State PA		Zip Code 19010	(Plus 4)

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

PAGE TOTAL \$ 21,900.00

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 Cand	ame of Filing Committee or Candidate				Reporting Period					
			From:			To:				
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$	0.00		
Mailing Address							7			
City	State	Zip Code (Plus 4)							
Receipt Description	•	•								
Enter Grand Total of Part E on Se	shadula I. Datailad	Summary Dago	Section	4				PAGE TOTAL		
cinter Grand Total Of Part E On St	chequie 1, Detailed	Summary Page,	, section	4.			\$	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 Perio	d	
PLANNED PARENTHOOD PA INC	From:	6/23/2020 To:	9/14/2020
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)	\$	0.00
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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Ca	Reporting Period							
	F					То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						 	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•				
				_	Г			
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	nmary Pa	ge,	PAGE TOTAL		
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			Reporting Period							
				Fro	m:		To:			
						DATE			AMOUN'	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE TO	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
PLANNED PARENTHOOD PA INC	From	6/23/2020	То:	<u>9/14/2020</u>			

			DATE				AMOUNT		
To Whom Paid				мо	DAY	YEAR			
Planned Parenthood PA Advocates				М		1 = Aux			
Mailing Address				6	29	2020	\$	2,248.94	
City Harrisburg State Zip Code (Plus 4)			Description of Expenditure						
PA 17102				salary allocation					
To Whom Paid				мо	DAY	YEAR			
Friends of Carolyn Comitta				МО		ILAK			
Mailing Address				7	16	2020	\$	500.00	
City West Chester State Zip Code (Plus 4)			Description of Expenditure						
PA 19380				Donation					
To Whom Paid				МО	DAY	YEAR			
Planned Parenthoo	od Keystone			М		TEAK			
Mailing Address				7	10	2020	\$	5,489.51	
City Warminster State Zip Code (Plus 4)			Description of Expenditure						
PA 18974			expense reimbursement						
To Whom Paid				мо	DAY	YEAR			
PA HDCC				М		TEAK			
Mailing Address			7	8	2020	\$	500.00		
City Harrisburg State Zip Code (Plus 4)			Description of Expenditure						
		PA	17108	donatio	n				
To Whom Paid				мо	DAY	YEAR			
Friends of Joe Cire	si			МО		ILAK			
Mailing Address				8	7	2020	\$	250.00	
City Royersford		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	19468	Donation					
To Whom Paid				мо	DAY	YEAR			
Friends of Mary Jo Daley			1.10		I LAIX				
Mailing Address			8	19	2020	\$	250.00		
City Conshohocken State Zip Code (Plus 4)			Description of Expenditure						
	PA 19428			Donation					

To Whom Paid	МО	DAY	YEAR						
Friends of Matt Bradford					12/11				
Mailing Address			8	6	2020	\$	500.00		
City Eagleville State Zip Code (Plus 4)				Description of Expenditure					
	PA	19403	Donation						
To Whom Paid				DAY	YEAR				
Friends of Joe Webster					ILAK				
Mailing Address				5	2020	\$	250.00		
City Collegeville	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	19426	Donation						
To Whom Paid			мо	DAY	YEAR				
Planned Parenthood PA Advocates			1-10		ILAK				
Mailing Address			9	2	2020	\$	1,621.56		
City Harrisburg	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	17102	Salary allocation						
						PAGE TOTAL			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	11,610.01			