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 :	ion 2018	30278			Report Filed B		CANDI	DATE		СОМІ	MITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Candic	late or Lo	bbyist:		PLANNE	d pa	RENTHOO	DD PEN	INSYL	VANIA	VOTES				
Street Address: 1514 N. 2ND ST															
City:HARRISBURGState:PAZip Code:17102															
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDAY PRE- PRIMARY 2. 30 DAY PRIMARY					POST- 3.		AMENDMENT REPORT?		Yes	Nc	 Image: A start of the start of	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		POST- 6.			TERMINATION REPORT?		Yes	Nc	
report type)	ANNUAL REPORT	7.	Year 2021				NG METHO				PAPER		\checkmark	DISKE	TTE
Name of Office S	Sought by Candida	ite:			-		DATE O	F ELE	стіо	Ν	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YE	AR					
							11		2	2021		(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FO	R OFFIC	E USE	ONLY	
Expenditures	s from:		1 1	20	021 T	0	3		29	2021					
A. Amount Bro	ught Forward Fro	m Last Re	eport			\$			64,9	38.41					
B. Total Monet	ary Contributions	And Rece	eipts (Fron	n Schee	dule I)	\$				0.00					
C. Total Funds Available (Sum Of Lines A and B) \$ 64,938.41															
D. Total Expen	ditures (From Sch	edule III)			\$			9,9	14.82					
E. Ending Cash	Balance (Subtrac	t Line D I	From Line	C)		\$			55,0	23.59					
F. Value Of In-	Kind Contribution	s Receive	ed (From S	chedul	e II)	\$				0.00					
G. Unpaid Deb	ts And Obligations	s (From S	chedule IV	/)		\$				0.00					
				AFF	IDAVI	Γ SE	CTION								
	s a Committee rep		-								-				
I swear (or affirm correct and complete) that this report, inc ete.	luding the	attached sc	hedules	filed on	paper	or by elect	ronic m	edium,	, are to	the best o	f my knov	vledge	and beli	ef , true
Sworn to and subs	scribed before me thi day of	S	20						S	ignatur	e of Perso	n Submitt	ing Rep	oort	
		ıre				_					Prin	ted Name			
My Commission E	xpires					_					Ema	il			
	мо	DA	Y	YR				Are	ea Cod	e	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's a	authorized	Comm	ittee, Ca	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amendo) that to the best of (ed.	my knowle	dge and beli	ief this	political	comm	ittee has n	ot viola	ted any	y provis	ions of th	e act of Ju	ine 3,1	937 (P.L	1333,
Sworn to and subso	ribed before me this									s	ignature o	of Candida	ite		
	day of		20			-					Printe	d Name			
	Signature					-									
My Commission Exp	-										Ema	il			
	мо	DA	Y	YR				Area	Code		Da	aytime Te	elephor	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summa	ily Paye			
Name of Filing Committee or Candidate	Reporting	g Period		
PLANNED PARENTHOOD PENNSYLVANIA VOTES	From:	<u>1/1/202</u>	<u>1</u> To:	<u>3/29/2021</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the	e 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	e 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)			\$	0.00
TOTAL for the	e Reporting Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (Fro	om Part E)			
TOTAL for the	e Reporting Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Peri totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report			\$	0.00

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 Commit	Reporting Period						
			From:	i cirioù	То		
			From:		10	•	
				DATE			AMOUNT
Full Name of Contributing) Committee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Г	PAGE TOTAL
Enter Grand Total of Pa	art A on Schedule I, Detail	ed Summary Page, Sec	tion 2.			\$	0.00

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

\$

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 Candidat	e			orting P	eriod				
From: To:									
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
PAGE TOTAL									
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committe	e			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						ſ		PAGE TOTAL	
Enter Grand Total of Part C on S	chedule I, Detai	led Summary Pa	age, Sectio	n 3.			\$	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	Reporting Period	
	From:	То:

				D	ATE		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion	-		
Employer Mailing Address/Principal Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	0.00

I

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 C	Name of Filing Committee or Candidate			Reporting Period					
From:					rom: To:				
			I	D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description									
Enter Grand Total of Part E o	- Schadula I. Datailac	l Summary Page	Section	4				PAGE TOT	AL
	i Schedule 1, Detailet	summary raye,	Section	7.			\$		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	od	
PLANNED PARENTHOOD PENNSYLVANIA VOTES	From:	<u>1/1/2021</u> To:	<u>3/29/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR	1	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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 Candidate	Reporting Period								
	From:			То:					
				DATE		АМО	UNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)	,						
Description of Contribution:	Description of Contribution:								
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	6	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						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business					Zip Code(Plus 4)		Descri	cription of Contribution		

Enter Grand Total of Part G on Schedule II, In-	Kind Contributic	ons Detailed	PAGE TOTAL
Summary Page, Section 3.			0.00
			1

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
PLANNED PARENTHOOD PENNSYLVANIA VOTES			From	om <u>1/1/2021</u>			<u>3/29/2021</u>
			DATE				AMOUNT
To Whom Paid Planned Parenthood PA Advocates			мо	DAY	YEAR		
Mailing Address 1514 N 2nd Street			1	22	2021	\$	9,914.82
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure salary allocation				
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	9,914.82