

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number :</b>		9400274		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> PLANNED PARENTHOOD PA INC												
<b>Street Address:</b>												
<b>City:</b> HARRISBURG						<b>State:</b> PA			<b>Zip Code:</b> 17102-2505			
<b>TYPE OF REPORT</b>  (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.	Year 2019	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						4	2	2019				
									(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		3	19	2019		4	12	2019				
<b>A. Amount Brought Forward From Last Report</b>						\$ 155,652.68						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 0.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 155,652.68						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 34,458.05						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 121,194.63						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
PLANNED PARENTHOOD PA INC	From: <u>3/19/2019</u> To: <u>4/12/2019</u>

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

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 0.00
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**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.

<b>PAGE TOTAL</b>
\$ 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: <span style="float: right;">To:</span>

			DATE	AMOUNT
Full Name of Contributor			MO	DAY
Mailing Address			YEAR	\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name			Occupation	
Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)	

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

<b>PAGE TOTAL</b>
\$ 0.00

## 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: <span style="float: right;">To:</span>
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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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
PLANNED PARENTHOOD PA INC		From: <u>3/19/2019</u> To: <u>4/12/2019</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 0.00

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
PLANNED PARENTHOOD PA INC	From <u>3/19/2019</u> To: <u>4/12/2019</u>

				DATE		AMOUNT	
To Whom Paid				MO	DAY	YEAR	\$
Steve Santarsiero for State Senate							
Mailing Address				3	21	2019	500.00
City	Newtown	State	Zip Code (Plus 4)	Description of Expenditure			
		PA	18940	Contributions			
To Whom Paid				MO	DAY	YEAR	\$
Maria for PA							
Mailing Address				3	21	2019	500.00
City	Spring House	State	Zip Code (Plus 4)	Description of Expenditure			
		PA	19477	Contributions			
To Whom Paid				MO	DAY	YEAR	\$
Friends of Jennifer O'Mara							
Mailing Address				3	19	2019	250.00
City	Springfield	State	Zip Code (Plus 4)	Description of Expenditure			
		PA	19064	Contributions			
To Whom Paid				MO	DAY	YEAR	\$
Friends of Donna Bullock							
Mailing Address				3	19	2019	250.00
City	Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure			
		PA	19102	Contributions			
To Whom Paid				MO	DAY	YEAR	\$
Friends of Christina Sappey							
Mailing Address				3	21	2019	250.00
City	Kennett Square	State	Zip Code (Plus 4)	Description of Expenditure			
		PA	19348	Contributions			
To Whom Paid				MO	DAY	YEAR	\$
Friends for Judy Schwank							
Mailing Address				3	21	2019	500.00
City	Reading	State	Zip Code (Plus 4)	Description of Expenditure			
		PA	19612	Contributions			

To Whom Paid			MO	DAY	YEAR	\$ 250.00
Friends of Kevin Boyle						
Mailing Address			3	21	2019	
City Philadelphia	State PA	Zip Code (Plus 4) 19115	Description of Expenditure Contributions			
To Whom Paid			MO	DAY	YEAR	\$ 250.00
Friends of Austin Davis						
Mailing Address			3	21	2019	
City McKeesport	State PA	Zip Code (Plus 4) 15132	Description of Expenditure Contributions			
To Whom Paid			MO	DAY	YEAR	\$ 250.00
Supporters for Carol Hill-Evans						
Mailing Address			3	21	2019	
City York	State PA	Zip Code (Plus 4) 17403	Description of Expenditure Contributions			
To Whom Paid			MO	DAY	YEAR	\$ 250.00
Friends of Mike Zabel						
Mailing Address			3	21	2019	
City Drexel Hill	State PA	Zip Code (Plus 4) 19026	Description of Expenditure Contributions			
To Whom Paid			MO	DAY	YEAR	\$ 250.00
Friends of Joe Ciresi						
Mailing Address			3	21	2019	
City Royersford	State PA	Zip Code (Plus 4) 19468	Description of Expenditure Contributions			
To Whom Paid			MO	DAY	YEAR	\$ 12.00
Wells Fargo						
Mailing Address			4	4	2019	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Bank and Merchant Fees			
To Whom Paid			MO	DAY	YEAR	\$ 106.79
Peter Fair						
Mailing Address			3	26	2019	
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure Expense Reimbursement			
To Whom Paid			MO	DAY	YEAR	\$ 20,586.96
Deliver Strategies						
Mailing Address			3	28	2019	
City Arlington	State VA	Zip Code (Plus 4) 22210	Description of Expenditure Printing			

<b>To Whom Paid</b> Deliver Strategies			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 10,252.30
<b>Mailing Address</b>			4	5	2019	
<b>City</b> Arlington	<b>State</b> VA	<b>Zip Code (Plus 4)</b> 22210	<b>Description of Expenditure</b> Printing Expense			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> <b>\$</b> 34,458.05

