### **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 9400	)274				port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOB	BYIST			
Name of Filing C	Committee, Candid	late or L	obbyist:		Plar	nned	Pare	nthood P	A Advo	cate	5							
Street Address:	1514 N 2ND	STREET	FL															
City:	HARRISBURG	i						State:	PA			Zip Cod	le: 17	7102-2	505			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	Y PRE	-	2.	30 DA		POST-	3.		AMENDM REPORT		Yes	No			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	y pri	<u>-</u>	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No		<b>\</b>	
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2002					IG METHO				PAPER		<b>V</b>	DISKE	TTE		
Name of Office S	Sought by Candida	ite:						DATE 0	F ELE	СТІО	N	District Office Party Code Cou Number Code Cod					ty	
								МО	DAY	YE	AR	- rumber	Number Code Code					
								11		5	2002		(SEE IN	STRUCTI	ONS FOR O	ODES)		
	Receipts and	МО	DAY	YEAR	R			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY			
Expenditures	irom:		1 1		1	T	0	12	:	31	2002							
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			22,0	91.38							
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$			7	40.00							
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			22,8	31.38							
D. Total Expend	ditures (From Sch	edule II	I)				\$			2,5	51.57							
E. Ending Cash	Balance (Subtrac	t Line D	From Line C	C)			\$			20,2	79.81							
F. Value Of In-	Kind Contribution	s Receiv	ed (From So	chedu	le I	I)	\$				0.00							
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	)			\$				0.00			•				
				AFF	·ID/	AVI	T SE	CTION										
PART I - If this is	s a Committee rep	ort, trea	surer sign h	nere.	If th	his is	a Car	ndidate re	eport, o	candi	date sig	ın here.						
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	attached sch	nedule	s file	ed on	paper	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ıe	
Sworn to and subs	cribed before me thi day of	s	20							S	ignature	of Perso	n Submit	ting Re <sub>l</sub>	oort			
	Signatu	ıre					- -					Prin	ted Name	e				
My Commission Ex	cpires						_					Ema	il					
	мо	D	AY	YR					Are	ea Cod	e	Daytim	e Teleph	one Nu	mber			
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	ee, C	andid	ate shall	sign h	ere.								
I swear (or affirm) No 320) as amende		my knowl	edge and belie	ef this	poli	itical	comm	ittee has n	ot viola	ted an	y provis	sions of the act of June 3,1937 (P.L. 1333,						
Sworn to and subsc	ribed before me this day of		20								S	Signature of Candidate						
							-					Printed Name						
My Commission Exp	Signature						-					Ema	il				-	
rry Commission Exp							_											
	МО	D	AY	YR	1				Area	Code		Da	aytime T	elephor	ne Numb	er		

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
Planned Parenthood PA Advocates	From:	То:	12/31/2002
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	Period (1)	\$	490.00
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)		\$	250.00
TOTAL for the Reporting	Period (2)	\$	250.00
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 Reporting	Period (3)	\$	0.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	740.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

**PAGE TOTAL \$**0.00

## 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 Candida	te		Repo	orting Pe	eriod			
Planned Parenthood PA Advocates			Fron	n:		To	<b>)</b> :	12/31/2002
		•			DATE			AMOUNT
Full Name of Contributor  Morrison Williams				мо	DAY	YEAR		
Mailing Address 485 Sunset Road					_	2002	\$	100.00
<b>City</b> Thomasville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17364		11	5	2002		
<b>Full Name of Contributor</b> Dolly Fisher				мо	DAY	YEAR		
Mailing Address 151 Five Points Ro	ad						\$	150.00
<b>City</b> Coatesville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19320		11	22	2002		

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

**PAGE TOTAL \$** 250.00

#### **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		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	nmary Pa	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			Rep	orting Pe	riod			
			Fron	n:		To	<b>)</b> :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Pla Business	ce of	City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	edule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00

## 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	Candidate		Report	ting Perio	od			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detailer	d Summary Page	Section	4			PA	GE TOTAL
	,,,	. Junimary 1 ago,	5000.011				\$	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 Advocates	From:	To:	12/31/2002
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 Candid	ate		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II, In-Kir	nd Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candida	te				Re	porting	Period					
					Fro	m:		То	:			
							DATE				AMOUNT	
Full Name of Contributor						мо	DAY	YEAR	1			
Mailing Address										\$		0.00
City	State		Zip Code(F	Plus 4)								
Employer of Contributor	•		•			Occupa	ation					
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	cripti	ion of (	Contributio	on
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOT	ΓAL
Summary Page, Section 3.												0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporti	ng Period			
Planned Parenthood PA Advoc	rates		From			То:	12/31/2002
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
First Union Bank							
Mailing Address 30 North T	hird Street		11	11	2002	\$	27.81
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u>                                     </u>	
J	PA	17101	Bank S	ervice Cha	rge		
<b>To Whom Paid</b> Planned Parenthood of Central	PA		МО	DAY	YEAR		
Mailing Address 728 South	Beaver Street		11	26	2002	\$	65.70
City York	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA 17043			list rental			
<b>To Whom Paid</b> First Union Bank			МО	DAY	YEAR		
Mailing Address 30 North T	hird Street		12	12	2002	\$	12.98
<b>City</b> Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	)	
j	PA	17101	Bank s	ervice chai	rge		
<b>To Whom Paid</b> Planned Parenthood of Cheste	r County		мо	DAY	YEAR		
Mailing Address 8 South Wa	ayne Street		12	19	2002	\$	228.83
City West Chester	State	Zip Code (Plus 4)	Descrip	tion of Exp	l oenditure		
	PA	19382		list rental			
<b>To Whom Paid</b> Star Printing, Inc.		•	МО	DAY	YEAR		
Mailing Address 400 Acorn	Lane		12	20	2002	\$	2,216.25
<b>City</b> Downingtown	State	Zip Code (Plus 4)	Descrin	tion of Exp	l penditure	:	
	PA	19335		g and maili			
Enter Grand Total of Expen	ditures on Page 1 Pa	anort Cover Page Item F	`				PAGE TOTAL
Enter Grand Total of Expen	uituies on Paye 1, Re	poit cover raye, Itelli L				\$	2,551.57