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 940	0274			Re File	port	t By:	CANDI	DATE		СОМ	4ITTEE	✓	LOB	BYIST			
Name of Filing C	Committee, Candi	date or L	obbyist:		Plar	nned	Pare	nthood P	A Advo	cate	5							
Street Address:	1514 N 2ND	STREET	FL															
City:	HARRISBUR	3						State:	PA			Zip Cod	ie: 17	7102-2	2505			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA		POST-	3.		AMENDM REPORT						
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	y pri	≣-	5.	30 DA		POST-	6. X			TERMINATION Yes No REPORT?					
report type)	ANNUAL REPOR	r 7.	Year 2003					NG METHO				PAPER		/	DISKE	TTE		
Name of Office S	- Sought by Candid	ate:			-			DATE 0	F ELE	CTIO	N	District Number	rty Code	Count Code	у			
								МО	DAY	YE	AR							
								11		4	2003		(SEE IN	STRUCTI	ONS FOR (ODES)		
Summary of Expenditures	Receipts and from:	МО	DAY	YEAR		Ļ	0	МО	DAY		AR	FO	R OFFI	CE USE	ONLY			
-	ught Forward Fro	m Lact B	1 1		1			11	-	10.6	2003							
	ary Contributions			Sche	dule	e I)	\$ \$			18,8	0.00							
C. Total Funds	Available (Sum 0	of Lines A	and B)				\$			18,8	307.45							
D. Total Expend	ditures (From Sc	nedule II	I)				\$			1,7	63.43							
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$			17,0	44.02							
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II	I)	\$				0.00							
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV	')			\$				0.00			1				
				AFF	·ID/	AVI	T SE	CTION										
PART I - If this is	s a Committee re	port, trea	surer sign	here.	If th	nis is	a Car	ndidate re	eport, o	candi	date sig	ın here.						
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sc	hedule	s file	ed on	paper	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , tru	e,	
Sworn to and subs	cribed before me th day of	is	20							S	ignature	of Perso	n Submit	ting Re	port		-	
	Signat	ure					- -					Prin	ted Name	e			-	
My Commission Ex	cpires											Ema	il				-	
	мо	D	AY	YR					Are	ea Cod	le	Daytim	e Telepi	none Nu	ımber			
Part II- If this is	a report of a car	ndidate's	authorized	Comn	nitte	ee, C	andid	ate shall	sign he	ere.								
I swear (or affirm) No 320) as amende		my knowl	edge and beli	ef this	poli	itical	comm	ittee has n	ot viola	olated any provisions of the act of June 3,1937 (P.L. 133							,	
Sworn to and subsc		5									Si	ignature o	of Candid	ate			-	
	day of						_					Printe	d Name				-	
M. C	Signature	ı					_					Ema	il				-	
My Commission Exp							_					Liila	-					
	МО	D	AY	YR					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:	To:	11/24/2003
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	g 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	g 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 Reporting	g Period (3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	g Period (4)	\$	0.00
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		\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2	250.00) in the				
Name of Filing Committee or Candidate				Reporting Period From: To			Го:		
					DATE			AMOUNT	
Full Name of Contribut	ing Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4))						
	!	I			<u> </u>			DAGE 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	ite		Rep	oorting P	eriod				
					From: To:				
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
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:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	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	me of Filing Committee or Candidate			Rep	orting Pe					
				Fror	n:		To	То:		
					D	ATE		AI	MOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address							\$	0.00		
City	State	Zip Cod	de (Plus	s 4)						
Employer Name	•				Occupa	tion				
Employer Mailing Address/Principal Pla Business	ice of	Ci	ty			State		Zip Cod	e (Plus 4)	
Enter Grand Total of Part C on Sch	edule I, Detailed S	Summary	Page,	Section	on 3.			P \$	AGE 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	bd			
			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. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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:	То:	11/24/2003
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS F	PER CONTRIBUTOR		
TOTAL for the Reporting Po	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Po	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Po	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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor			•			Occupa	ation		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	n-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	te			Reporti	ng Period			
Planned Parenthood PA Advocates				From			То:	11/24/2003
					DATE			AMOUNT
To Whom Paid People for Steven Nickol				мо	DAY	YEAR		
Mailing Address C/O TREAS: BARE	BARA R METZLER	R 860 RA	VER LN	11	20	2003	\$	300.00
City GLEN ROCK	State PA		Zip Code (Plus 4) 17327		otion of Exp			
To Whom Paid Citizens for Stewart Greenleaf				МО	DAY	YEAR		
Mailing Address 1555 TERWOOD F	RD			11	20	2003	\$	350.00
City HUNTINGDON VALLEY PA Zip Code (Plus 4) 19006			_	otion of Exp				
To Whom Paid Committee to Elect Ronald Miller				мо	DAY	YEAR		
Mailing Address C/O TREAS: ROBI	N E MILLER 227	7 SOUTH	PINE ST	11	20	2003	\$	250.00
City Red Lion	State PA		Zip Code (Plus 4) 17356		otion of Exp			
To Whom Paid Committee to Re-Elect Beverly Macket	ereth			МО	DAY	YEAR		
Mailing Address C/O TREAS: SUSA	AN D. VOYZEY 2	765 COL	DSPRING RD	11	20	2003	\$	65.00
City York	State PA		Zip Code (Plus 4) 17404	1	ntion of Exp			
To Whom Paid Planned Parenthood Association of Bucks County		МО	DAY	YEAR				
ailing Address 721 New Rodgers Road			11	20	2004	\$	78.53	
City Bristol	State PA		Zip Code (Plus 4) 19007		otion of Exp list rental	penditure		

To Whom Paid Planned Parenthood of Chester County				DAY	YEAR					
Mailing Address 8 South Wayne Street			11	20	2003	\$		50.33		
City West Chester	State PA	Zip Code (Plus 4) 19382	Description of Expenditure Mailing list rental							
To Whom Paid Planned Parenthood of Central PA			МО	DAY	YEAR					
Mailing Address 728 South Beaver Street			11	20	2003	\$		23.03		
City York	State PA	Zip Code (Plus 4) 17403		cription of Expenditure ing list rental						
To Whom Paid Planned Parenthood of NorthEast PA			МО	DAY	YEAR					
Mailing Address P.O. Box 813			11	20	2003	\$		76.05		
City Trexlertown	State PA	Zip Code (Plus 4) 18087	Description of Expenditure Mailing list rental							
To Whom Paid Planned Parenthood Southeastern PA			МО	DAY	YEAR					
Mailing Address 1144 Locust Street			11	20	2003	\$		294.60		
1						Description of Expenditure Mailing list rental				
City Philadelphia	State PA	Zip Code (Plus 4) 19107	1	_	enditure					
City Philadelphia To Whom Paid Planned Parenthood of the Susqueha	PA		1	_	enditure YEAR					
To Whom Paid	PA nna Valley		Mailing	list rental		\$		86.78		
To Whom Paid Planned Parenthood of the Susqueha	PA nna Valley		Mo Mo Descrip	DAY	YEAR 2003	\$		86.78		
To Whom Paid Planned Parenthood of the Susqueha Mailing Address 1514 North 2nd S	PA nna Valley treet State	19107 Zip Code (Plus 4)	Mo Mo Descrip	DAY 20	YEAR 2003	\$		86.78		
To Whom Paid Planned Parenthood of the Susqueha Mailing Address 1514 North 2nd S City Harrisburg To Whom Paid	PA nna Valley treet State PA	19107 Zip Code (Plus 4)	Mo 11 Descrip Mailing	DAY 20 tion of Explist rental	YEAR 2003 penditure	\$		86.78		

To Whom Paid Planned Parenthood Pennsylvania Advocates			МО	DAY	YEAR		
Mailing Address 231 State Street 2nd Floor			11	20	2003	\$	67.13
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Mailing list rental				
To Whom Paid Wachovia Bank			МО	DAY	YEAR		
Mailing Address 30 North 3rd Street			10	11	2003	\$	15.33
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Bank service charge				
Enter Grand Total of Expe	nditures on Page 1. Po	port Cover Page Item D					PAGE TOTAL
Enter Grand Total of Expe	nultures on Page 1, Re	port Cover Page, Item D	•			\$	1,763.43