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		Repoi		•		DATE		COM	AITTEE	V	LO	DD T	151			
Name of Filing C	Committee, Candid	late or L	obbyist:	j	Planne	d Par	entho	od P	A PAC								
Street Address:																	
City:	HARRISBURG	i					Sta	te:	PA			Zip Co	de: 1	7102-	-250)5	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY										AMENDN REPORT		Yes		No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5. X		30 DAY F ELECTION			POST- 6.		TERMINATION REPORT?		Yes		No	\
report type)	ANNUAL REPORT	7.	Year 2007				NG M					PAPER		Y	D	ISKET	ΓΕ
Name of Office S	– Sought by Candida	te:					DA	TE O	F ELE	CTIC	N	District Number	Office Code	P	arty	Code C	ounty ode
							МО		DAY	YI	EAR		•				
								11		6	2007		(SEE IN	NSTRUC [*]	TIONS	FOR CO	DES)
	Receipts and	МО	DAY	YEAR			МО		DAY	Y	EAR	FC	R OFFI	CE US	E O	NLY	
Expenditures	from:		1 1	. 20	007	ТО		10	2	22	2007						
A. Amount Bro	ught Forward Fro	m Last R	eport		•	9	\$		•	13,	345.20						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sched	dule I)		\$				0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			13,	345.20						
D. Total Expend	ditures (From Sch	edule II	I)				\$			(500.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$			12,7	745.20						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	e II)	;	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	/)		!	\$				0.00			1			
					IDAV												
I swear (or affirm)	s a Committee rep	-	_								_		f my kno	wledg	e an	d belief	, true
correct and comple Sworn to and subs	ece. scribed before me thi	s									Siama t	of Perso	- Cub-si	Mina D			
-	day of		_ 20			_					Signature	or Perso	ii Subiiii	itiliy K	ероі		
	Signatu	ire				_						Prin	ted Nam	е			
My Commission Ex	· —					_						Ema	il				
	МО		AY	YR				Area Code Daytime Telephone Number						er			
	a report of a can				•				_						400	- (5.1.	
No 320) as amende		ny knowi	eage and bei	ier this	politica	ı comi	nittee	nas n	ot viola	cea ar	iy provis	ions or th	e act of .	une 3,	,193,	/ (P.L.)	1333,
Sworn to and subsc	ribed before me this day of		20								S	ignature	of Candid	late			
												Printe	d Name				
My Commission Exp	Signature pires					_						Ema	il				-
	мо	D	AY	YR		_			Area	Code		D	aytime 1	Γeleph	one I	Number	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
Planned Parenthood PA PAC	From:	1/1/200	<u>7</u> To:	10/22/2007
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the 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 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 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			\$	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 Committee	or Candidate	R	Reporting	Period			
		F	rom:		То	I	
		•		DATE			AMOUNT
Full Name of Contributing Co	ommittee		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)

Name of Filing Committee	or Candidate		Rep	orting P	eriod			
			Fro	m:		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.

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		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule 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				Rep	orting Pe	riod					
				Fron	n:			To:			
					D	ATE			А	MOUNT	
Full Name of Contributor					мо	DAY	YEA	R	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	4)							
Employer Name					Occupa	tion					
Employer Mailing Address/Principal Plac	e of Business		City		•	State		7	Zip Cod	de (Plus 4	·)
Enter Grand Total of Part C on Schee	dule I, Detailed Su	umm	nary Page,	Section	on 3.			\$	F	PAGE TOT	AL 0.00
							L				

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 of	or Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							\neg	
City	State	Zip Code (I	Plus 4)					
Receipt Description	•	•			1	•	•	
Futor Coand Total of Bank	Cabadula I Detailed	Commence De	Cookie					PAGE TOTAL
Enter Grand Total of Part I	e on Schedule I, 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 Period		
Planned Parenthood PA PAC	From:	<u>1/1/2007</u> To:	10/22/2007
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 Candidate	Name of Filing Committee or Candidate Re						Reporting 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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL					
						\$	(0.00				

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

600.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or	r Candidate		Reporti	ng Period				
Planned Parenthood PA PAC	Planned Parenthood PA PAC				From <u>1/1/2007</u> To			
				DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
Committee to Elect Jesse Wi	hite							
Mailing Address			10	2	2007	\$	100.00	
City Cecil	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
	PA	15321	Campa	ign Contrib	ution			
To Whom Paid			мо	DAY	YEAR			
Friends of Josh Shapiro			140		ILAK			
Mailing Address			9	24	2007	\$	500.00	
City Abington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19001	Campa	ign contrib	ution			
Forter Consul Tabel of Four							PAGE TOTAL	
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item I	J.			١.		