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	ommittee, Candid	ate or L	obbyist:		Plar	nned	Pare	nthood P	A PAC				_				
Street Address:																	
City:	HARRISBURG							State:	PA			Zip Cod	le: 1	7102-2	505		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE		2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA		POST-	POST- 6. X			ATION ?	Yes	No		/
report type)	ANNUAL REPORT	7.	Year 2009 FILING METHO () CHECK ON								PAPER		/	DISKE	TTE		
Name of Office S	ought by Candida	te:						DATE O	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YI	EAR			-			
								11		3	2009		(SEE IN	STRUCTI	ONS FOR C	ODES)
	Receipts and	МО	DAY Y	/EAR				МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		1 1	2	009	T	0	11	2	23	2009						
A. Amount Bro	ught Forward Fror	n Last R	eport				\$	_		29,	938.52						
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dule	e I)	\$			1,0	500.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			31,	538.52						
D. Total Expend	ditures (From Sch	edule II	I)				\$			1,6	545.19						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C))			\$			29,8	393.33						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sch	edu	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			'			
				AFF	ΊDΑ	AVI	T SE	CTION									
PART I - If this is	a Committee rep	ort, trea	surer sign he	ere. 1	If th	nis is	a Car	ndidate re	eport, c	candi	date sig	ın here.					
I swear (or affirm) correct and comple	that this report, incl ete.	uding the	attached sche	dules	file	ed on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tr	ue
Sworn to and subs	cribed before me this day of	;	20							5	Signature	of Perso	n Submit	ting Re _l	oort		_
	Signatu	re					-					Prin	ted Nam	е			-
My Commission Ex	rpires						_					Ema	il				_
	МО	D/	AY	YR					Are	ea Co	le	Daytim	e Telepi	none Nu	mber		╝
Part II- If this is	a report of a cand	lidate's	authorized C	omn	nitte	ee, C	andid	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ned.	ny knowle	edge and belief	this	poli	itical	comm	ittee has n	ot viola	ted ar	y provis	ions of th	e act of J	une 3,1	937 (P.L.	. 1333	3,
Sworn to and subsc	ribed before me this day of		20								S	ignature o	of Candid	ate			_
							-					Printe	d Name				-
My Commission Exp	Signature ires						-					Ema	il				-
	мо	D	AY	YR			-		Area	Code		Da	aytime T	elephor	ne Numbe	er	-

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>9</u> To:	11/23/2009
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	250.00
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)			\$	1,350.00
TOTAL for the Reporting	Period	(2)	\$	1,350.00
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			\$	1,600.00

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	R	eporting	Period				
		F	rom:		То	:	
		1		DATE			AMOUNT
Full Name of Contributing C	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 Candida	te		Reportir	ng Po	eriod				
Planned Parenthood PA PAC			From:		1/1/2	2 <u>009</u> To	<u>11/23/2009</u>		
					DATE			AMOUNT	
Full Name of Contributor			МС	`	DAY	YEAR			
Morgan Plant			MC	,	DAT	ILAK			
Mailing Address							\$	250.00	
City Carlisle	State	Zip Code (Plus 4)	11	23	2009			
	PA	17013							
Full Name of Contributor			мс	1	DAY	YEAR			
Suzanne Kranz			MC	,	DAT	TEAR			
Mailing Address							\$	250.00	
City Carlisle	State	Zip Code (Plus 4)	10	29	2009			
	PA	17013							
Full Name of Contributor			МС	2	DAY	YEAR			
Karen McCool					5711	12/11			
Mailing Address							\$	250.00	
City West Chester	State	Zip Code (Plus 4)	10	29	2009			
	PA	19382							
Full Name of Contributor			МС	.	DAY	YEAR			
Nancy Clark			1-10		DAI	ILAK			
Mailing Address							\$	100.00	
City Langhorne	State	Zip Code (Plus 4)	11	9	2009			
	PA	19047							
Full Name of Contributor			МС	,	DAY	YEAR			
Margaret Leigh Groff			1-10		DAI	ILAK			
Mailing Address							\$	100.00	
City Doylestown	State	Zip Code (Plus 4)	11	9	2009			
	PA	18901							
Full Name of Contributor			МС	,	DAY	YEAR			
Debbie Hutchison			1-10		DAI	ILAK			
Mailing Address							\$	100.00	
City Doylestown	State	Zip Code (Plus 4)	11	9	2009			
	PA	18901							
Full Name of Contributor			МС	,	DAY	YEAR			
Susan Kressly			1410	,	DAI	ILAK			
Mailing Address							\$	100.00	
City Doylestown	State	Zip Code (Plus 4)	11	9	2009			
	PA	18901							

Full Name of Contributor			мо	DAY	YEAR	
Jeffrey Nye			MO	DAT	ILAK	
Mailing Address						\$ 100.00
City Washington Crossing	State	Zip Code (Plus 4)	11	9	2009	
	PA	18977				
Full Name of Contributor						
run Maine of Contributor			MO	DAY	VEAD	
Anne Stephano			МО	DAY	YEAR	
			МО	DAY	YEAR	\$ 100.00
Anne Stephano	State	Zip Code (Plus 4)	MO	DAY 9	YEAR 2009	\$ 100.00

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

PAGE TOTAL
\$ 1,350.00

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	ame of Filing Committee or Candidate			Period						
			From:			То:				
				DA	TE		A	AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR			0.00	
Mailing Address							- \$		0.00	
City	State	Zip Cod	e (Plus 4)							
								PAGE TOT	AL	
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.)

ne of Filing Committee or Candidate				orting Pe	eriod			
			Fror	n:		To) :	
				D	ATE		АМ	MOUNT
				мо	DAY	YEAR	\$	0.00
							7	
State	Zi	p Code (Plus	4)				İ	
•				Occupa	tion			
lace of Business		City		•	State		Zip Code	e (Plus 4)
hedule I, Detail	ed Sumn	mary Page,	Section	on 3.				AGE TOTAL 0.00
	State Place of Business	State Zi Place of Business	State Zip Code (Plus Place of Business City	State Zip Code (Plus 4) Place of Business City	From: MO State Zip Code (Plus 4) Occupa	From: DATE MO DAY State Zip Code (Plus 4) Occupation Place of Business City State	From: To DATE MO DAY YEAR State Zip Code (Plus 4) Occupation Place of Business City State hedule I, Detailed Summary Page, Section 3.	From: To: DATE AN

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	ing Peri	od			
			From:			То:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	lus 4)					
Receipt Description	'	.					<u> </u>	
				_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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>1/1/2009</u> To:	11/23/2009
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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ame of Filing Committee or Candidate Ro						
	From: To:						
		•		DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						7 \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•	-	•	•		•	
Enter Grand Total of Part F on S	chedule II, In-Ki	nd Contributions Detai	led 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 Candidate	ame of Filing Committee or Candidate					Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Re	Reporting Period			
Planned Parenthood PA PAC Fro	From <u>;</u>	1/1/2009	То:	11/23/2009

				DATE			AMOUNT		
To W	hom Paid			МО	DAY	YEAR			
Frien	ds of Mike Gerber								
Mailing Address				11	23	2009	\$	250.00	
City	Ambler	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	19002	campaig	gn event				
To Whom Paid				мо	DAY	YEAR			
Allegheny County Democratic Delegation				140		ILAK			
Mailing Address			11	12	2009	\$	500.00		
City	Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
		PA 15226			campaign event				
To W	hom Paid			МО	DAY	YEAR			
Plann	ed Parenthood Assoc of F	PA		1-10		ILAK			
Mailir	ng Address			11	9	2009	\$	344.26	
City	Harrisburg State Zip Code (Plus 4)			Description of Expenditure					
		PA	17101	list rent	al				
To W	hom Paid			мо	DAY	YEAR			
Planned Parenthood Assoc of PA				1-10		ILAK			
Mailing Address			10	29	2009	\$	50.93		
City	Harrisburg	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	17101	list rental					
To Whom Paid				мо	DAY	YEAR			
Citizens for Hughes				140		ILAK			
Mailing Address			10	27	2009	\$	250.00		
City	Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	19131	campaig	gn event				
To W	hom Paid			МО	DAY	YEAR			
Phyllis Mundy for State Rep Committee			-1.0						
Mailing Address			10	20	2009	\$	250.00		
City	Kingston	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	18704	campaig	gn event				
	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL		
∟nte	r Grand Total of Expend	aitures on Page 1, Re	port Cover Page, Item D).			\$	1,645.19	