WE CHOOSE...

to provide comprehensive reproductive health care – confidentially, compassionately, affordably;

to protect through prevention – educating honestly and accurately;

to support those who need us most – without bias or judgment, without fear, without fail.

Together, our voices ensure that the doors of opportunity remain open for those we serve and their families.

That is our commitment.

THIS IS OUR CHOICE.
BOARD OF DIRECTORS*

Rabbi Jonathan Adland
Alice Bennett, PhD
Rev. Steven E. Clapp, secretary
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Ray Cubberley
Claudette Einhorn, chair
Kristin Gorder McMurtrey
Cathy J. Miller
Aleta A. Mungal
Yvonne Perkins, CPA, treasurer
Marya M. Rose, J.D.
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Alice Schloss
Cynthia S. Schmidt
Deborah J. Simon, chair-elect
Doris Sims
Ellyn Stecker, M.D.
Ericka N. Taylor, J.D.
Julie L. Thomas, PhD
Rebecca Susan Thompson
Katherine McConahay Willing


Our special thanks to other board members serving this year:

Samantha Miller
Jeffry W. Thigpen, PhD
Crystal Grave, Ex Officio

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President and CEO
Betty Cockrum

Liz Carroll, vice president of patient services
Margaret Lawrence Banning, vice president of public policy and education
Crysta Struben, vice president of development and communications
Dr. John Stutsman, medical director
Suzannah Wilson Overholt, vice president of finance and administration

PPIN HEALTH CENTERS
Avon
Bedford
Bloomington
Columbus
East Chicago
Elkhart
Evansville
Fort Wayne
Gary
Hammond
Indianapolis:
   Castleton
   Eastside
   Midtown
   Southside
   Georgetown at 86th
   Lafayette
   Madison
   Merrillville
   Michigan City
   Mishawaka
   Muncie
   New Albany
   Richmond
   Scottsburg
   Seymour
   Terre Haute
   Valparaiso
   Warsaw

I love knowing that I have a safe place to make an educated choice about what is right for me. Thank you for all that you do.

-Anonymous, age 40
What a year for health care. And I do mean what a year! There were lots of positives, and then there were those challenges we were able to turn into positives.

It all started with the loss of more than a million dollars in federal funding when the distribution of Title XX dollars was privatized in Indiana. This prompted the closure of six health centers around the state, layoffs and a restructuring of our entire organization. At the close of the fiscal year, nearly one year later, we were stronger, leaner and better able to serve, to educate and to protect the health of our patients. PPIN cut nearly $2 million from the budget and closed out the fiscal year in the black. Thanks to the support of generous donors like you, we actually exceeded our fundraising goals. We are so grateful that you helped us serve about 85,000 women and men, and educate nearly 21,000 Hoosiers.

While PPIN has emerged from the recession with a stable bottom line there are always challenges in the work we do, especially when it comes to the legislature. A movement is afoot to defund Planned Parenthoods across the country - both at the national and state levels, prohibiting any federal funds for family planning to be given to us or any other affiliate. It is an incredibly shortsighted pursuit. PPIN is the leading provider of all reproductive health care to low-income women in the state. The government funding in question is about prevention. None of it supports abortion. Not a penny. It pays for basic health care services such as Pap tests that screen for cancer, breast exams, STD testing and treatment and birth control. If PPIN were not here for the more than 23,000 currently served through the funding, the outcomes would be tragic – more unintended pregnancies (and most assuredly more abortions) and more disease. Women trust us. Simply put, we do it better and for less, and we have the capacity and skill to see more patients than any other provider. There is a reason we have been around for nearly 80 years – we are good at caring for women and men in a respectful, private, affordable manner.

In response to these defunding attempts, we have launched our Protect Our Patients campaign. We have a petition online that you are encouraged to sign at www.ppaction.org/campaign/protectourpatients to show your support for PPIN. Another way you can show your support is to talk with your friends and colleagues about the important work we do. There is strength in numbers.

Our mission to provide quality, affordable health care got quite the boost when health care reform was approved by Congress! Lawmakers finally recognized what we’ve known all along. Americans need help accessing and receiving health care - just ask any of our patients. Seventy-four percent of
PPIN patients are at or below 150 percent poverty.

One of the ways we are protecting our patients is by making changes in the structure of our reproductive health care operation. Following an organizational review during the last fiscal year, PPIN determined that we needed to devote additional physician time to quality assurance, family planning oversight and administrative duties. We hired Dr. John Stutsman to become our new medical director. Stutsman, certified by the American Board of Obstetrics and Gynecology, is an assistant clinical professor with the Indiana University (IU) School of Medicine Department of Obstetrics and Gynecology, and clinical director for the IU National Center of Excellence in Women’s Health. Stutsman has assumed many of the administrative responsibilities at PPIN while Dr. Michael King focuses on direct patient care.

We continue to improve the patient experience at all of our centers. Our Southside Indianapolis and Seymour health centers both relocated this past fiscal year to more modern, comfortable spaces. We also cut the price of our most popular birth control pills in half and now offer $12 pills to help Hoosiers struggling to buy birth control while juggling other bills.

Another development that I’m thrilled to report is that we have had three more adoptions from PPIN referrals. We provide counseling on all options, including adoption, at all of our health centers and have free, on-site counseling from partner adoption agencies in the health centers where surgical abortions are performed.

In addition to low-cost birth control, PPIN offers services to make reproductive health care more accessible to Hoosiers. For women who do not need Pap tests every year under current guidelines, birth control is available at PPIN health centers without a Pap test or pelvic exam. This service for women who meet medical eligibility criteria saw participation nearly double to more than 15,800 during the last fiscal year!

Our annual Gathering of Goddesses and Gods was very special last May. Planned Parenthood Federation of America President Cecile Richards flew in for the occasion and gave a moving speech that helped us raise a record $130,000 – a thirty percent increase over the previous year. That’s money that goes directly into our Women’s Health Fund, which provides preventive reproductive health care for women and men around the state.

This year can be summed up in one phrase, “Don’t count PPIN out.” Our employees are among the best in the state. They are meeting the challenges of the economic slowdown by doing more with less...and improving patient care at the same time. We couldn’t do it without our dedicated employees or our loyal donors and supporters. Together, we will continue to be smart and do good.

Sincerely,

Betty Cockrum
President and CEO
Planned Parenthood of Indiana
Many years ago, PPIN established the Women’s Health Fund (WHF) to assist women and men by providing annual exams, cancer screenings, STD testing and treatment and birth control to those unable to pay for these services due to financial hardship. Each year, requests for WHF far exceed available funding.

However, in FY10, PPIN supporters stepped up to help fulfill the need with unprecedented support. Increased funds were raised through a strategic direct mail campaign and PPIN’s annual Gathering of Goddesses and Gods event. Both efforts raised a record-breaking amount for WHF. Due to this success, PPIN was able to nearly double the funds available to patients in FY11. Thank you to all who support the fund.

Additional funds enabled us to underwrite PPIN’s Free Pap Day efforts during National Women’s Health Week, May 9 to 15. Nineteen PPIN health centers across the state hosted a Free Pap Day during this important week and performed nearly 400 free Pap tests. Pap tests, a crucial part of women’s routine health care, can detect the presence of abnormal cells in the cervix that may become cancer.

IN FY10, over 4,200 women and men received assistance through this fund.

Jori Smith was just 35 when she died suddenly. A Merrillville health center employee and mother of a young daughter, Jori was active, vibrant and full of life.

To honor her memory, Jori’s friends and co-workers spurred a campaign highlighting PPIN’s cholesterol testing. For just $5, women across the state were able to get their cholesterol levels checked during American Heart Month in February.

Cholesterol testing is crucial to women’s health. Cholesterol is one of the main risk factors for heart disease – the number one killer of women in the United States.

We think Jori would be happy to know that our reduced-price testing drove 48 women to get their cholesterol checked in February – a huge number considering 95 women total were tested the previous year. In total, we provided 320 cholesterol tests and lipid profiles in FY10.
FISCAL YEAR 10: RETURNS FROM RESTRUCTURING

PPIN restructured in FY10, which was painful, but necessary. We slashed about $2 million from our budget and made the gut-wrenching decision to close six health centers and lay off the equivalent of 22 full time employees. The organization’s cuts and additional efforts to bring in new patients helped PPIN finish in the black and put us on solid financial footing for the future.

**FY10 Unaudited Numbers**

<table>
<thead>
<tr>
<th>Revenue Type</th>
<th>Dollars</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions and Grants</td>
<td>2,058,092</td>
<td>13%</td>
</tr>
<tr>
<td>Gov’t Contracts and Grants</td>
<td>2,008,760</td>
<td>13%</td>
</tr>
<tr>
<td>Patient Services Revenue</td>
<td>10,955,985</td>
<td>70%</td>
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<tr>
<td>Investment, In-Kind, Education and Misc. Revenue</td>
<td>647,469</td>
<td>4%</td>
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<tr>
<td><strong>TOTAL REVENUE</strong></td>
<td>15,670,306</td>
<td>100%</td>
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</table>

<table>
<thead>
<tr>
<th>Expenses Type</th>
<th>Dollars</th>
<th>Percent</th>
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<tbody>
<tr>
<td>Patient Services</td>
<td>12,284,674</td>
<td>81%</td>
</tr>
<tr>
<td>Education and Training</td>
<td>439,912</td>
<td>3%</td>
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<tr>
<td>Management and General</td>
<td>1,368,122</td>
<td>9%</td>
</tr>
<tr>
<td>Public Policy</td>
<td>281,718</td>
<td>2%</td>
</tr>
<tr>
<td>Development</td>
<td>389,230</td>
<td>2%</td>
</tr>
<tr>
<td>Marketing</td>
<td>434,803</td>
<td>3%</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td>15,198,459</td>
<td>100%</td>
</tr>
</tbody>
</table>

**INC/(DEC) IN NET ASSETS** $471,847 3%

**Pie Charts**

- **Revenue**
  - Patient Services Revenue: 70%
  - Contributions and Grants: 13%
  - Gov’t Contracts and Grants: 13%
  - Investment, In-Kind, Education and Misc.: 4%

- **Expenses**
  - Patient Services: 81%
  - Education and Training: 3%
  - Public Policy: 2%
  - Development: 2%
  - Management and General: 9%
  - Marketing: 3%
PPIN’S NUMBERS ADD UP TO FULL ACCREDITATION

Any organization that goes through an accreditation knows just how much is riding on that process. There are site visits—and for us that means 18 health center visits, 30 clinicians observed, and more than 400 patient records thoroughly reviewed, as well as interviews with numerous PPIN staff and board members throughout the organization.

The numbers involved in Planned Parenthood Federation of America’s latest accreditation visit added up quickly, and in the end they tallied something very important: PPIN had once again met the organization’s standards of clinical and organizational excellence, earning it full accreditation status.

PPFA performs accreditation reviews every four years. We’re proud to say that our organization experienced significant improvements since the last visit in 2005, reducing the number of corrections needed by half. Several reviewers commented that they truly enjoyed their time in Indiana and had very favorable interactions with PPIN staff and board members. They also noted the quality of our facilities and the respect with which our patients are treated.

We look upon this process as an opportunity to ensure that PPIN and our staff are providing quality services to Hoosier communities. Thank you to everyone for assisting us in our accreditation efforts.

PROTECTING OUR PATIENTS THROUGH EDUCATION

Education highlights during FY10 included a very successful Get Yourself Tested campaign, and an innovative partnership with Asante Children’s Theatre that resulted in a video that will be featured on our website, a parent-child communication session and an informal discussion on sexuality communication tips that was facilitated by a peer educator. PPIN provided 1,115 total hours of education and training programs.

In addition to providing single session sexuality education programs in communities around the state, PPIN educators have made some progress in providing more extensive, multi-session programs in Indiana schools this year. One school each in Bloomington and Indianapolis and two schools in northwest Indiana all received eight to 10 instructional sessions. This resulted in about 24 students receiving up to 25 hours of sexuality education, which we know produces better results than shorter sessions and a standard we are working towards in more of our programs.

This fiscal year, PPIN educators reached:

| Education/Training Session Participants | 20,511 |
| Education/Training Session Hours | 1,115 |
| Resource Center Patrons | 75 |
| Materials used | 306 |
| (excluding pamphlets educators used at tabling events) |
| Extended outreach | 793 |
| AskMe! Inquiries | 289 |
| **TOTAL** | **21,668** |
PROCESSES PROVIDED

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pap tests</td>
<td>26,559</td>
</tr>
<tr>
<td>Number of severely abnormal paps</td>
<td>2,568</td>
</tr>
<tr>
<td>Breast exams only</td>
<td>29,064</td>
</tr>
<tr>
<td>Chlamydia tests</td>
<td>32,900</td>
</tr>
<tr>
<td>Number of positive tests</td>
<td>2,801</td>
</tr>
<tr>
<td>Gonorrhea tests</td>
<td>32,831</td>
</tr>
<tr>
<td>Number of positive tests</td>
<td>492</td>
</tr>
<tr>
<td>Colposcopy</td>
<td>296</td>
</tr>
<tr>
<td>Cryotherapy</td>
<td>30</td>
</tr>
<tr>
<td>LEEPs</td>
<td>35</td>
</tr>
<tr>
<td>Abortions</td>
<td>5,580</td>
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<tr>
<td>HIV tests</td>
<td>7,637</td>
</tr>
<tr>
<td>Gardasil/HPV vaccine</td>
<td>459</td>
</tr>
<tr>
<td>Pregnancy tests</td>
<td>21,156</td>
</tr>
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</table>

DEMOGRAPHICS

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of females</td>
<td>79,504</td>
</tr>
<tr>
<td>Number of males</td>
<td>5,526</td>
</tr>
<tr>
<td>Ages 17 and under</td>
<td>9,284</td>
</tr>
<tr>
<td>Ages 18-19</td>
<td>10,963</td>
</tr>
<tr>
<td>Ages 20-24</td>
<td>28,793</td>
</tr>
<tr>
<td>Ages 25-29</td>
<td>17,371</td>
</tr>
<tr>
<td>Ages 30-34</td>
<td>8,672</td>
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<tr>
<td>Ages 35 and over</td>
<td>9,950</td>
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<tr>
<td>Median age</td>
<td>23</td>
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POVERTY STATUS

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Patients at or below poverty:*</td>
<td>59%</td>
</tr>
<tr>
<td>Patients at or below 150% poverty:</td>
<td>74%</td>
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RACE/ETHNIC ORIGIN

<table>
<thead>
<tr>
<th>Category</th>
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<tbody>
<tr>
<td>White</td>
<td>73%</td>
</tr>
<tr>
<td>Black</td>
<td>17%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>7%</td>
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<tr>
<td>Other</td>
<td>3%</td>
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</tbody>
</table>

CONTRACEPTIVES DISTRIBUTED

<table>
<thead>
<tr>
<th>Category</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Oral Contraceptives</td>
<td>254,570</td>
</tr>
<tr>
<td>Condoms/Spermacides</td>
<td>78,087</td>
</tr>
<tr>
<td>Emergency Contraception (EC)</td>
<td>13,932</td>
</tr>
<tr>
<td>Other Contraceptives</td>
<td>39,771</td>
</tr>
</tbody>
</table>

* The federal government defines poverty as an annual income of $10,816 for one person or $22,408 for a family of four.

The Guttmacher Institute says that every public dollar spent on family planning services saves the federal and state governments $4.78 in Medicaid costs in Indiana.
PPIN’s seventh annual Gathering of Goddesses and Gods on May 8 drew a crowd of 550 people and raised $130,000 for PPIN’s Women’s Health Fund. Planned Parenthood Federation of America (PPFA) President Cecile Richards was a featured speaker and shared with attendees specifics on how health care reform will help many more Americans access vital reproductive health services. Mark your calendar for next year’s event on April 16, 2011. For more information, please contact the development staff at (317) 637-4343 or visit www.ppin.org/goddesses.

Thanks to all of our sponsors for the 2010 Gathering of Goddesses and Gods. Your support is invaluable!

From Left: Gathering of Goddesses and Gods Honorary Chair Claudette Einhorn, PPFA President Cecile Richards, PPIN President and CEO Betty Cockrum, PPIN Incoming Board Chair Deborah J. Simon.
It was an historic year for health care across the country, with the passage of health care reform – the federal Patient Protection and Affordable Care Act. PPIN led efforts in the state and participated in national efforts to ensure that the final bill would be the best possible vehicle for Hoosiers, especially our patients, and for Planned Parenthood. Some of those provisions included: expanding access to Medicaid family planning services; the Women’s Health Amendment, which guarantees access to preventive health care coverage at zero cost-sharing; providing $75 million for evidence-based sex education; and, banning insurance companies from dropping patients because of pre-existing conditions, such as pregnancy. Unfortunately, Indiana will not be seeing the dollars for sexuality education because the state declined to apply for them. It’s a step back, but we will not give up the fight to see comprehensive, medically-accurate sexuality education in our schools.

At the same time the nation was taking this major step forward, some elected officials in Indiana were doing just the opposite. The Allen County Commissioners voted to approve an admitting privileges ordinance we believe sets a dangerous, and possibly illegal, precedent that could be followed by other counties seeking to limit or eliminate legal abortions. Allen is the third county to pass a similar regulation. However, the first two are not counties where abortions are currently provided, so therefore the actions were more symbolic than actually restricting access. The Griffith Town Council also voted to make it harder for organizations like PPIN to locate facilities in their community.

We appreciate the support we continue to receive from lawmakers on the local, state and federal levels. In 2010, we’d like to especially thank the Democratic members of our Indiana delegation for their part in making progress towards true health care reform.

It is not unusual for Planned Parenthood across the country to see protestors outside of their health centers. This year, PPIN staff and supporters began to get visits at their homes. So, we did what we do best -- we made lemonade out of lemons. Staff developed an innovative counter-measure to convert those protests into much-needed funds for preventive health care. In total, PPIN raised nearly $25,000 in just three months from 40 donors. The campaign is continuing into FY11.

“Every dollar raised through this program helps us prevent unintended pregnancy, the spread of disease and the incidence of abortion,” said PPIN President and CEO Betty Cockrum. “Each time they show up, they are helping us raise more money to do more good!”

Individuals can still make a pledge per protest or a one-time donation to this program by visiting ppin.org. All proceeds will underwrite PPIN’s preventive health care efforts.
LARGE GRANT MAKES PPIN STRONGER

This year, PPIN received a $150,000 award from the Nina Mason Pulliam Charitable Trust for general operating support of the organization’s Marion County health centers, including expansion of the Women’s Health Fund. With the generous support of the Nina Mason Pulliam Charitable Trust, women and men in central Indiana will continue to have access to critical reproductive health care and educational resources they might not otherwise be able to afford.

Founded in 1998 after the death of Nina Mason Pulliam, the Trust seeks to help people in need, especially women, children and families; to protect animals and nature; and to enrich community life in the metropolitan areas of Indianapolis and Phoenix.

CHOOSE THE CIRCLE OF CHOICE

The Circle of Choice honors our visionary supporters who choose to perpetuate their commitment to PPIN’s mission beyond their lifetimes. For those who care deeply about the future of family planning, sexuality education and freedom of choice, joining the Circle of Choice is both an enduring and powerful way to sustain the work of PPIN for future generations. Creating a legacy is easy. It can be as simple as listing PPIN as a beneficiary through your will, life insurance policy or retirement plan. Other options include Gift Annuities and Charitable Lead Trusts. If you are interested in discussing any of these options please contact us at (317) 637-4343 or visit www.ppin.org/planned_giving.aspx.

Sandra and Hans Andersen
Amanda Baker Mulrooney
Sarah Baumgart and William Lozowski
Judy and Jonathan Birge
Dr. Richard A. Bogg
Mrs. C. A. Bookwalter
Marilyn Bowie
Theresa Burnett and Brian Marks
Paul Carmony
Liz Carroll and Brian Vargus
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Betty Cockrum
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Ms. Elizabeth A. Smith
Nancy and James Smith
Dan and Susan Sterner
Robert Stroup
Jack and MaryAnn Thompson
Susan Vinicor
Carol and Dan Willoughby

* deceased
Next fiscal year, PPIN will not be printing names of donors in the annual report. In an effort to be good stewards of your gifts, we will be omitting the donor listing to reduce printing and mailing costs. Thank you for your continued support.

$100 – $249 Friend

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Garcia Construction Group, Inc.
Hayden & Company
Indianapolis Prevention Consortium
John H. Boner Community Center
Kappa Kappa Kappa, Alpha Chapter

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Community Foundation of Greater Fort Wayne
Legacy Foundation, Inc.

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Christine Altman and John Dicklin
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Veanne and Eric Anderson
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Patricia and Ramon Arredondo
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Wendy W. Boyle
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Marsha Brown
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Mr. and Ms. Jim Brugh
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Jennifer and Shaun Burch
Sue Burger
Ms. Margaret Burlingame
Wanda Burnett
Kathryn Burns
Charrie and Jarrod Buskirk
Ms. Barbara Carmichael
Duane and Pat Carmony
Sharon Carnes and Larry Silvestri
Colleen Carpenter and David Campbell
Ms. Evelyn Carroll
Joy and Gilbert Chaitin
Ms. Debra Chelf
Mr. Victor E. Childers
Peter Cholak
Drs. Robert & Bonnidell Clouse
Garry Cobbum
Glenda Cochran
Richard Colberg
Dewey and Cheryl Conces
Phil and Carolyn Cooley
Kevin Corcoran
Ellen Corley
Cheryl and Daniel Crookshanks
Genee Crump, L.C.S.W.
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Mary D’Angelo
Judith and Bill Davis
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Peter Fadde and Patricia Sullivan
Barbara Farrar and Tom Evans
Reverend Leroy Fassett
Ms. Mary E. Fell
Suzanne Felli
Marc and Cindy Fine
Robyn and Steve Fisher
Thanks for always being there when I need you.
I have always found that my visits to Planned Parenthood health centers have made me feel at ease and fully informed.

-Sarah, age 36
Paul Muzikar  
Alan Nadon  
Mr. and Mrs. Samuel H. Neff  
Karen Nichols  
Reverend and Mrs. William A. Nicoll  
Larisa Niles-Carnes  
Dr. Laverne Nishihara  
David and Martha Nord  
Dolores Nork Tomusk  
John and Martha Nusbaum  
Doris Offutt  
Harold and Denise Ogren  
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Janet and Joseph O’Tousa  
Andrea and Jon Pactor  
Jane and Andrew Paine  
Andy Palm  
Nancy Patchen  
Gerald and Dorit Paul  
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-Anonymous

*deceased
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I am a 55-year-old grandmother. When a second sister of mine was diagnosed with uterine cancer, I knew that I should get a Pap test and be seen by a health professional. No one would take me because I didn’t have health insurance. I went to Planned Parenthood and received excellent care and help with my many questions. It is a wonderful organization that has helped thousands of poor Hoosiers like me.

-Aonymous, age 55

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