

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

ADDRESS (number and street) 555 Capitol Mall, Suite 1425

Check if different than previously reported. (ACC) Sacramento CA 95814

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00488502

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---|---------------------------------------|--|

Election on 11 02 2010 in the State of CA

5. Covering Period 10 14 2010 through 11 22 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Annie Lundahl

Signature of Treasurer Electronically Filed by Annie Lundahl Date 03 22 2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates
of CA

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		0.00
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	157897.72									
(c) Total Receipts (from Line 19)	89130.40	419729.09								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	247028.12	419729.09								
7. Total Disbursements (from Line 31)	227993.34	400694.31								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19034.78	19034.78								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	766.69									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	38470.40	190196.82
(ii) Unitemized	660.00	1720.93
(iii) TOTAL (add Lines 11(a)(i) and (ii)	39130.40	191917.75
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	50000.00	227680.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	89130.40	419597.75
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	131.34
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	89130.40	419729.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	89130.40	419729.09

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	22988.64	26097.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	22988.64	26097.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	175388.35	220092.33
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	34500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	34500.00
29. Other Disbursements.....	29616.35	120004.86
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	227993.34	400694.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	227993.34	400694.31

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	89130.40	419597.75
34. Total Contribution Refunds (from Line 28(d))	0.00	34500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	89130.40	385097.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	22988.64	26097.12
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	131.34
38. Net Operating Expenditures (subtract Line 37 from Line 36)	22988.64	25965.78

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A. Full Name (Last, First, Middle Initial)
Sarah K. Aubrey

Mailing Address 16 South Oakland Avenue, Suite 200

City Pasadena State CA Zip Code 91101

FEC ID number of contributing federal political committee. **C**

Name of Employer Deep Eddy Productions Occupation Television Producer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2010

Transaction ID: INCA167

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Steven Blank

Mailing Address 216 Marmona Drive

City Menlo Park State CA Zip Code 94025

FEC ID number of contributing federal political committee. **C**

Name of Employer Stanford University Occupation Lecturer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 26 / 2010

Transaction ID: INCA165

Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Julian Cortella

Mailing Address 3826 Alameda de las Pulgas

City Menlo Park State CA Zip Code 94025

FEC ID number of contributing federal political committee. **C**

Name of Employer Summit Preparatory Charter High School Occupation Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 24 / 2010

Transaction ID: IDTA23

Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) ▶ **6500.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A. Full Name (Last, First, Middle Initial)
Planned Parenthood Affiliates of California

Mailing Address 555 Capitol Mall, Suite 510

City State Zip Code
Sacramento CA 95814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
62676.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: INCA186IDTA23

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Annette P. Cumming

Mailing Address 165 Huckleberry Drive

City State Zip Code
Jackson WY 83001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Forthcoming Fund President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	1	0

Transaction ID: INCA101

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ann Doerr

Mailing Address 555 Bryant Street, #722

City State Zip Code
Palo Alto CA 94301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	1	0

Transaction ID: INCA204

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **6000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A.

Full Name (Last, First, Middle Initial)

Eva Grove

Mailing Address 171 Main Street, #278

City State Zip Code
Los Altos CA 94022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	1	0

Transaction ID: IDTA25

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Planned Parenthood Affiliates of California

Mailing Address 555 Capitol Mall, Suite 510

City State Zip Code
Sacramento CA 95814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 62676.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	1	0

Transaction ID: INCA186IDTA25

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Planned Parenthood Action Fund of San Diego and Riverside Counties

Mailing Address 1075 Camino del Rio South

City State Zip Code
San Diego CA 92108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010 Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2549.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	1	0

Transaction ID: INCA77

Amount of Each Receipt this Period

1041.00

SUBTOTAL of Receipts This Page (optional) ►

6041.00

TOTAL This Period (last page this line number only) ►

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C. Form/Schedule : **SA11AI**

Phonebanking, Electronic Communications & Earned Media (Estimate for 10/17/10 - 10/29/10)

Transaction ID : **INCA77**

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A.

Full Name (Last, First, Middle Initial)
Planned Parenthood Action Fund of San Diego and Riverside Counties

Mailing Address 1075 Camino del Rio South

City State Zip Code
San Diego CA 92108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2549.42

Date of Receipt

M M / D D / Y Y Y Y
10 / 30 / 2010

Transaction ID: INCA151

Amount of Each Receipt this Period

1143.50

B.

Full Name (Last, First, Middle Initial)
Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo, Inc.

Mailing Address 518 Garden Street

City State Zip Code
Santa Barbara CA 93117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
626.16

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2010

Transaction ID: INCA73

Amount of Each Receipt this Period

212.17

C.

Full Name (Last, First, Middle Initial)
Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo, Inc.

Mailing Address 518 Garden Street

City State Zip Code
Santa Barbara CA 93117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
626.16

Date of Receipt

M M / D D / Y Y Y Y
10 / 30 / 2010

Transaction ID: INCA149

Amount of Each Receipt this Period

147.84

SUBTOTAL of Receipts This Page (optional)

1503.51

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **INCA151**

In-Kind Contribution - Phonebanking & Electronic Communications (10/30/10 - 11/2/10)

B. Form/Schedule : **SA11AI**
Transaction ID : **INCA73**

In-Kind Contribution - Phonebanking, Campus Student Outreach & Electronic Communications (10/17/10 - 10/29/10)

C. Form/Schedule : **SA11AI**
Transaction ID : **INCA149**

In-Kind Contribution -Phonebanking (10/30/10 - 11/2/10)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 58
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A.	Full Name (Last, First, Middle Initial) Planned Parenthood Advocacy Project Los Angeles		Date of Receipt
	Mailing Address 400 West 30th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 17 / 2010
	City	State	Zip Code
	Los Angeles	CA	90007
	FEC ID number of contributing federal political committee. C		Transaction ID: INCA83
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 2445.05
		<input type="text"/> 5738.33	

B.	Full Name (Last, First, Middle Initial) Planned Parenthood Advocacy Project Los Angeles		Date of Receipt
	Mailing Address 400 West 30th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 30 / 2010
	City	State	Zip Code
	Los Angeles	CA	90007
	FEC ID number of contributing federal political committee. C		Transaction ID: INCA145
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 743.42
		<input type="text"/> 5738.33	

C.	Full Name (Last, First, Middle Initial) Planned Parenthood Advocates Mar Monte		Date of Receipt
	Mailing Address 1691 The Alameda		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 17 / 2010
	City	State	Zip Code
	San Jose	CA	95126
	FEC ID number of contributing federal political committee. C		Transaction ID: INCA79
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 993.69
		<input type="text"/> 52817.40	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 4182.16
TOTAL This Period (last page this line number only)	<input type="text"/>

A. Form/Schedule : **SA11AI**
Transaction ID : **INCA83**

In-Kind Contribution: Phonebanking & Op Ed Article (Estimate for 10/17/10 -10/29/10)

B. Form/Schedule : **SA11AI**
Transaction ID : **INCA145**

In-Kind Contribution - Phonebanking (10/30/10 - 11/2/10)

C. Form/Schedule : **SA11AI**
Transaction ID : **INCA79**

In-Kind Contribution: Phonebanking, Campus Student Outreach, Electronic Communications, Earned Media
(10/17/10 - 10/29/10)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 58
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A.

Full Name (Last, First, Middle Initial)
Planned Parenthood Advocates Mar Monte

Mailing Address 1691 The Alameda

City State Zip Code
San Jose CA 95126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
52817.40

Date of Receipt
MM / DD / YYYY
10 / 30 / 2010

Transaction ID: INCA196

Amount of Each Receipt this Period
609.15

B.

Full Name (Last, First, Middle Initial)
Planned Parenthood Affiliates of California

Mailing Address 555 Capitol Mall, Suite 510

City State Zip Code
Sacramento CA 95814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
62676.84

Date of Receipt
MM / DD / YYYY
10 / 17 / 2010

Transaction ID: INCA71

Amount of Each Receipt this Period
1978.08

C.

Full Name (Last, First, Middle Initial)
Planned Parenthood Affiliates of California

Mailing Address 555 Capitol Mall, Suite 510

City State Zip Code
Sacramento CA 95814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
62676.84

Date of Receipt
MM / DD / YYYY
10 / 30 / 2010

Transaction ID: INCA139

Amount of Each Receipt this Period
1533.62

SUBTOTAL of Receipts This Page (optional) ► **4120.85**

TOTAL This Period (last page this line number only) ►

A. Form/Schedule : **SA11AI**
Transaction ID : **INCA196**

In-Kind Contribution - Phonebanking & Earned Media (10/30/10 - 11/2/10)

B. Form/Schedule : **SA11AI**
Transaction ID : **INCA71**

In-Kind Contribution -Organizing affiliate phonebanking, electronic communications & financial organizing (10/17/10 - 10/30/10)

C. Form/Schedule : **SA11AI**
Transaction ID : **INCA139**

In-Kind Contribution - Organizing affiliate phonebanking, electronic communications & financial organizing (10/30/10 - 11/2/10)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A. Full Name (Last, First, Middle Initial)
Planned Parenthood of Orange and San Bernardino Counties Action Fund

Mailing Address 700 S. Tustin Street

City State Zip Code
Orange CA 92866

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1465.74

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 17 / 2010

Transaction ID: INCA197

Amount of Each Receipt this Period
801.81

B. Full Name (Last, First, Middle Initial)
Planned Parenthood of Orange and San Bernardino Counties Action Fund

Mailing Address 700 S. Tustin Street

City State Zip Code
Orange CA 92866

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1465.74

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 30 / 2010

Transaction ID: INCA147

Amount of Each Receipt this Period
629.07

C. Full Name (Last, First, Middle Initial)
Planned Parenthood Shasta-Diablo Action Fund

Mailing Address 2185 Pacheco Blvd.

City State Zip Code
Concord CA 94522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 13863.86

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 15 / 2010

Transaction ID: INCA102

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **6430.88**

TOTAL This Period (last page this line number only) ►

A. Form/Schedule : **SA11AI**
Transaction ID : **INCA197**

In-Kind Contribution: Phonebanking & Electronic Communications (10/17/10 - 10/29/10)

B. Form/Schedule : **SA11AI**
Transaction ID : **INCA147**

In-Kind Contribution - Phonebanking & Electronic Coummunication (10/30/10 - 11/2/10)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A.

Full Name (Last, First, Middle Initial)
Planned Parenthood Shasta-Diablo Action Fund

Mailing Address 2185 Pacheco Blvd.

City State Zip Code
Concord CA 94522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13863.86

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2010

Transaction ID: INCA75

Amount of Each Receipt this Period

809.81

B.

Full Name (Last, First, Middle Initial)
Planned Parenthood Shasta-Diablo Action Fund

Mailing Address 2185 Pacheco Blvd.

City State Zip Code
Concord CA 94522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13863.86

Date of Receipt

M M / D D / Y Y Y Y
10 / 28 / 2010

Transaction ID: INCA168

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)
Planned Parenthood Shasta-Diablo Action Fund

Mailing Address 2185 Pacheco Blvd.

City State Zip Code
Concord CA 94522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13863.86

Date of Receipt

M M / D D / Y Y Y Y
10 / 30 / 2010

Transaction ID: INCA141

Amount of Each Receipt this Period

382.19

SUBTOTAL of Receipts This Page (optional)

3692.00

TOTAL This Period (last page this line number only)

38470.40

A. Form/Schedule : **SA11AI**
Transaction ID : **INCA75**

In-Kind Contribution: Phonebanking & Campus Student Outreach (Estimate for 10/17/10 - 10/29/10)

C. Form/Schedule : **SA11AI**
Transaction ID : **INCA141**

In-Kind Contribution - Phonebanking & GOTV Signs in San Francisco & Concord (10/30/10 - 11/2/10)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 58

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A.

Full Name (Last, First, Middle Initial)

Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo PAC

Mailing Address 518 Garden Street

City	State	Zip Code
Santa Barbara	CA	93101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	1	0

Transaction ID: INCA160

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo PAC

Mailing Address 518 Garden Street

City	State	Zip Code
Santa Barbara	CA	93101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: INCA163

Amount of Each Receipt this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

Planned Parenthood of Orange and San Bernardino Counties Community Action Fund PAC

Mailing Address 555 Capitol Mall, Suite 1425

City	State	Zip Code
Sacramento	CA	95814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: INCA162

Amount of Each Receipt this Period

25000.00

SUBTOTAL of Receipts This Page (optional) ►

40000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 24 / 58	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A.	Full Name (Last, First, Middle Initial) Planned Parenthood San Diego & Riverside Counties Action Fund		Date of Receipt
	Mailing Address 555 Capitol Mall, Suite 1425		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Sacramento	CA	95814
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="20000.00"/>	Transaction ID: INCA164
			Amount of Each Receipt this Period <input type="text" value="10000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="50000.00"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Feminist Majority</p> <p>Mailing Address 433 S. Victory Blvd.</p> <p>City State Zip Code Beverly Hills CA 90212</p> <p>Purpose of Disbursement Election Night Watch Party</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB193</p> <p>Date of Disbursement 11 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 1332.88</p> <p>001 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Olson, Hagel & Fishburn, LLP</p> <p>Mailing Address 555 Capitol Mall, Suite 1425</p> <p>City State Zip Code Sacramento CA 95814</p> <p>Purpose of Disbursement Legal & Reporting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB174</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 7559.03</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Olson, Hagel & Fishburn, LLP</p> <p>Mailing Address 555 Capitol Mall, Suite 1425</p> <p>City State Zip Code Sacramento CA 95814</p> <p>Purpose of Disbursement Legal & Reporting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB187</p> <p>Date of Disbursement 11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 14096.73</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ►

22988.64

TOTAL This Period (last page this line number only) ►

22988.64

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Alliance Print & Design

Mailing Address
930 R Street

City Sacramento	State CA	Zip Code 95811
--------------------	-------------	-------------------

Purpose of Expenditure Palm Cards	Category/ Type 24E
--------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	189758.51
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
212.75

Transaction ID: EDTEALC53

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Lindsay Beyerstein

Mailing Address
315 Smith Street, Apt. 3

City Brooklyn	State NY	Zip Code 11231
------------------	-------------	-------------------

Purpose of Expenditure Blogging Articles	Category/ Type 24E
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	189758.51
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
150.00

Transaction ID: EDTEALC43

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	362.75
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER ▼ C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Lindsay Beyerstein

Mailing Address
315 Smith Street, Apt. 3

City Brooklyn	State NY	Zip Code 11231
Purpose of Expenditure Blogs		Category/ Type 24E

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought 189758.51

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
300.00

Transaction ID: EDTEALC71

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Robert Brigham

Mailing Address
1415 Sheridan, #21

City Chico	State CA	Zip Code 95926
Purpose of Expenditure Media Organizing		Category/ Type 24E

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought 189758.51

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Amount
1000.00

Transaction ID: EDTEALC55

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	1300.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date 03 / 22 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Concentric Media

Mailing Address
P.O. Box 1414

City Menlo Park	State CA	Zip Code 94026
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Purpose of Expenditure Film Clips	Category/ Type 24E
--------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	189758.51
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
35.15

Transaction ID: EDTEALC48

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Continental Colorcraft

Mailing Address
1166 West Garvey

City Monterey	State CA	Zip Code 91754
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Purpose of Expenditure Stickers	Category/ Type 24E
------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	189758.51
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
799.95

Transaction ID: EDTEALC65

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	835.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Feminist Majority

Mailing Address
433 S. Victory Blvd.

City Beverly Hills	State CA	Zip Code 90212
-----------------------	-------------	-------------------

Purpose of Expenditure Blogging & Reporting	Category/ Type 24E
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	189758.51
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
125.00

Transaction ID: EDTEALC70

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Matthew Luotto

Mailing Address
454 9th Avenue

City Menlo Park	State CA	Zip Code 94025
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Purpose of Expenditure YouTube Videos	Category/ Type 24E
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	189758.51
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
120.00

Transaction ID: EDTEALC44

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	245.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl _____
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Matthew Luotto

Mailing Address
454 9th Avenue

City Menlo Park	State CA	Zip Code 94025
--------------------	-------------	-------------------

Purpose of Expenditure Editing for DVD Clips	Category/ Type 24E
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	189758.51
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Amount
390.00

Transaction ID: PDTE11

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Marina Graphic Center, Inc.

Mailing Address
12901 Cerise Avenue

City Hawthorne	State CA	Zip Code 90250
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Purpose of Expenditure Signs & Flyers	Category/ Type 24E
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	189758.51
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
6349.82

Transaction ID: EDTEALC45

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	6349.82
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA		FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Mering Carson

Mailing Address
1700 I Street, Suite 210

City Sacramento	State CA	Zip Code 95811
--------------------	-------------	-------------------

Purpose of Expenditure Radio Ads	Category/ Type 24E
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election
for Office Sought 189758.51

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
60000.00

Transaction ID: EDTEALC49

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Mering Carson

Mailing Address
1700 I Street, Suite 210

City Sacramento	State CA	Zip Code 95811
--------------------	-------------	-------------------

Purpose of Expenditure Radio Ads	Category/ Type 24E
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election
for Office Sought 189758.51

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
10000.00

Transaction ID: EDTEALC56

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	70000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Planet Kelly

Mailing Address
2425 Meadowbrook Road

City Sacramento	State CA	Zip Code 95825
--------------------	-------------	-------------------

Purpose of Expenditure Mailer	Category/ Type 24E
----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	189758.51
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Amount
29944.98

Transaction ID: PDTE1

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Planet Kelly

Mailing Address
2425 Meadowbrook Road

City Sacramento	State CA	Zip Code 95825
--------------------	-------------	-------------------

Purpose of Expenditure Mailer	Category/ Type 24A
----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought	30795.76
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Amount
28571.76

Transaction ID: PDTE2

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	58516.74
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

A. Form/Schedule : **SE**
Transaction ID : **PDTE1**

Represents Independent Expenditure incurred as debt during pre-general report period & paid during post general report period

B. Form/Schedule : **SE**
Transaction ID : **PDTE2**

Represents Independent Expenditure incurred as debt during pre-general report period & paid during post general report period

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Planet Kelly

Mailing Address
2425 Meadowbrook Road

City Sacramento	State CA	Zip Code 95825
--------------------	-------------	-------------------

Purpose of Expenditure Signs	Category/ Type 24A
---------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought	30795.76
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
974.00

Transaction ID: EDTEALC51

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Planet Kelly

Mailing Address
2425 Meadowbrook Road

City Sacramento	State CA	Zip Code 95825
--------------------	-------------	-------------------

Purpose of Expenditure Shipping for Mailer	Category/ Type 24A
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Name of Federal Candidate supported or Opposed by expenditure:
Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought	30795.76
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Amount
1250.00

Transaction ID: PDTE13

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	2224.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

B. Form/Schedule : **SE**
Transaction ID : **PDTE13**

Represents Independent Expenditure incurred as debt during pre-general report period & paid during post general report period

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Planet Kelly

Mailing Address
2425 Meadowbrook Road

City State Zip Code
Sacramento CA 95825

Purpose of Expenditure Category/Type
Shipping for Mailer 24E

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought 189758.51

Date
MM / DD / YYYY
10 / 29 / 2010

Amount
1250.00

Transaction ID: PDTE9
Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Action Fund of San Diego and Riverside Counties

Mailing Address
1075 Camino del Rio South

City State Zip Code
San Diego CA 92108

Purpose of Expenditure Category/Type
Phonebanking, Electronic Communications & Earned Media (Estimated Value of 6,974.0 and 0.25) 24E

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought 189758.51

Date
MM / DD / YYYY
10 / 17 / 2010

Amount
1041.00

Transaction ID: EDTEALC39
Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2291.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date MM / DD / YYYY
03 / 22 / 2011

A. Form/Schedule : **SE**
Transaction ID : **PDTE9**

Represents Independent Expenditure incurred as debt during pre-general report period & paid during post general report period

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Action Fund of San Diego and Rivers-
de Counties

Mailing Address
1075 Camino del Rio South

City San Diego	State CA	Zip Code 92108
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Purpose of Expenditure
Phonebanking & Elect-
ronic Communications
(10/30/10 - 11/2/10)

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
1143.50

Transaction ID: EDTEALC64

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election for Office Sought 189758.51

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Action Fund of Santa Barbara, Ventura
and San Luis Obispo, Inc.

Mailing Address
518 Garden Street

City Santa Barbara	State CA	Zip Code 93117
-----------------------	-------------	-------------------

Purpose of Expenditure
Phonebanking, Campus
Student Outreach &
Electronic Communica-
tions (10/30/10 - 11/2/10)

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Date
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Amount
212.17

Transaction ID: EDTEALC37

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election for Office Sought 189758.51

(a) SUBTOTAL of Itemized Independent Expenditures	1355.67
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M D D Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Action Fund of Santa Barbara, Ventura
and San Luis Obispo, Inc.

Mailing Address
518 Garden Street

City State Zip Code
Santa Barbara CA 93117

Purpose of Expenditure
Phonebanking (10/30/-
10 - 11/2/10) Category/Type **24E**

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought **189758.51**

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
147.84

Transaction ID: EDTEALC63

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Advocacy Project Los Angeles

Mailing Address
400 West 30th Street

City State Zip Code
Los Angeles CA 90007

Purpose of Expenditure
Phonebanking & Op Ed
Article (Estimate for
10/17/10 - 10/29/10) Category/Type **24E**

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought **189758.51**

Date
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Amount
2445.05

Transaction ID: EDTEALC42

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2592.89
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Advocacy Project Los Angeles

Mailing Address
400 West 30th Street

City State Zip Code
Los Angeles CA 90007

Purpose of Expenditure
Phonebanking (10/30/-
10 - 11/2/10) Category/Type **24E**

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought **189758.51**

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
743.42

Transaction ID: EDTEALC61

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Advocates Mar Monte

Mailing Address
1691 The Alameda

City State Zip Code
San Jose CA 95126

Purpose of Expenditure
Phonebanking, Campus
Student Outreach, E-
lectronic Communication
Category/Type **24E**

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought **189758.51**

Date
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Amount
993.69

Transaction ID: EDTEALC40

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) **SUBTOTAL** of Itemized Independent Expenditures **1737.11**

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Advocates Mar Monte

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
1691 The Alameda

Amount
609.15

City State Zip Code
San Jose CA 95126

Transaction ID: EDTEALC60

Purpose of Expenditure
Phonebanking & Earned Media (10/30/10 - 11-12/10)
Category/Type **24E**

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
189758.51

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Affiliates of California

Date
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Mailing Address
555 Capitol Mall, Suite 510

Amount
1978.08

City State Zip Code
Sacramento CA 95814

Transaction ID: EDTEALC36

Purpose of Expenditure
Organizing affiliate phonebanking, electronic communications & media for organizing (estimate for 10/30/10 - 11/12/10)
Category/Type **24E**

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
189758.51

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2587.23
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature
Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA		FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Affiliates of California

Mailing Address
555 Capitol Mall, Suite 510

City State Zip Code
Sacramento CA 95814

Purpose of Expenditure
Organizing affiliate phonebanking, electronic communications & mailings for organizing (10/30/10 - 11/2/10)
Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Category/Type **24E**

Calendar Year-To-Date Per Election for Office Sought **189758.51**

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
1533.62

Transaction ID: EDTEALC58

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood of Orange and San Bernardino Counties
Action Fund

Mailing Address
700 S. Tustin Street

City State Zip Code
Orange CA 92866

Purpose of Expenditure
Phonebanking & Electronic Communications
10/17/10 - 10/29/10
Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Category/Type **24E**

Calendar Year-To-Date Per Election for Office Sought **189758.51**

Date
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Amount
801.81

Transaction ID: EDTEALC78

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2335.43
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood of Orange and San Bernardino Counties
Action Fund

Mailing Address
700 S. Tustin Street

City Orange	State CA	Zip Code 92866
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Purpose of Expenditure
Phonebanking & Electronic Communication
(10/30/10 - 11/2/10)

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
629.07

Transaction ID: EDTEALC62

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election for Office Sought
189758.51

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Shasta-Diablo Action Fund

Mailing Address
2185 Pacheco Blvd.

City Concord	State CA	Zip Code 94522
-----------------	-------------	-------------------

Purpose of Expenditure
Phonebanking & Campus Student Outreach (Es-
timate for 10/17/10 -
11/29/10)

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Date
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Amount
809.81

Transaction ID: EDTEALC38

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election for Office Sought
189758.51

(a) SUBTOTAL of Itemized Independent Expenditures	1438.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Shasta-Diablo Action Fund

Mailing Address
2185 Pacheco Blvd.

City State Zip Code
Concord CA 94522

Purpose of Expenditure
Phonebanking & GOTV
Signs in San Francisco & Concord (10/30/10)
Category/Type **24E**

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought **189758.51**

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
382.19

Transaction ID: EDTEALC59

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Political Data Inc.

Mailing Address
825 South Victory Blvd.

City State Zip Code
Burbank CA 91502

Purpose of Expenditure
Phone Lists
Category/Type **24E**

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought **189758.51**

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
632.04

Transaction ID: EDTEALC84

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1014.23
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Political Data Inc.

Mailing Address
825 South Victory Blvd.

City Burbank	State CA	Zip Code 91502
-----------------	-------------	-------------------

Purpose of Expenditure Phone Lists	Category/ Type 24E
---------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election
for Office Sought 189758.51

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Amount
718.56

Transaction ID: EDTEALC85

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Political Data Inc.

Mailing Address
825 South Victory Blvd.

City Burbank	State CA	Zip Code 91502
-----------------	-------------	-------------------

Purpose of Expenditure Phone List	Category/ Type 24E
--------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election
for Office Sought 189758.51

Date
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Amount
47.69

Transaction ID: EDTEALC83

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	766.25
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Progressive Victory

Date
M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Mailing Address
4111 Sunset Blvd., Suite 342

Amount
780.00

City State Zip Code
Los Angeles CA 90029

Transaction ID: EDTEALC69

Purpose of Expenditure
Opinion Eds
Category/Type 24E

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 189758.51

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Brianna Schwanke

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
147 Lexington Ave

Amount
131.25

City State Zip Code
Redwood City CA 94062

Transaction ID: EDTEALC47

Purpose of Expenditure
Film Clips
Category/Type 24E

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 189758.51

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	911.25
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Brianna Schwanke

Date
M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Mailing Address
147 Lexington Ave

Amount
61.25

City State Zip Code
Redwood City CA 94062

Transaction ID: PDTE12

Purpose of Expenditure
Blogging for DVD Clips
Category/Type 24E

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 189758.51

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
The Spoken Hub

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
1001 G Street, NW, Suite 400E

Amount
8000.00

City State Zip Code
Washington DC 20001

Transaction ID: EDTEALC28

Purpose of Expenditure
Robo Calls
Category/Type 24E

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 189758.51

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	8000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER ▼ C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Paul Wittenberg

Mailing Address
167 Berkshire Court

City State Zip Code
San Ramon CA 94582

Purpose of Expenditure Category/Type
On-Line Ads 24E

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought
189758.51

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
9275.00

Transaction ID: EDTEALC50

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Paul Wittenberg

Mailing Address
167 Berkshire Court

City State Zip Code
San Ramon CA 94582

Purpose of Expenditure Category/Type
On-Line Ads 24E

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought
189758.51

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Amount
1250.00

Transaction ID: EDTEALC57

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	10525.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	175388.35

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 1

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 49 / 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A.	Full Name (Last, First, Middle Initial) Alliance Print & Design <hr/> Mailing Address 930 R Street <hr/> City Sacramento State CA Zip Code 95811 <hr/> Purpose of Disbursement State Election Communication Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB181 Date of Disbursement 10 / 22 / 2010 <hr/> Amount of Each Disbursement this Period 2328.92 <hr/> 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Alliance Print & Design <hr/> Mailing Address 930 R Street <hr/> City Sacramento State CA Zip Code 95811 <hr/> Purpose of Disbursement State Election Communication Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB188 Date of Disbursement 11 / 17 / 2010 <hr/> Amount of Each Disbursement this Period 53.75 <hr/> 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Lindsay Beyerstein <hr/> Mailing Address 315 Smith Street, Apt. 3 <hr/> City Brooklyn State NY Zip Code 11231 <hr/> Purpose of Disbursement State Election Communication Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB203 Date of Disbursement 10 / 19 / 2010 <hr/> Amount of Each Disbursement this Period 150.00 <hr/> 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

2532.67

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A. Full Name (Last, First, Middle Initial) Lindsay Beyerstein <hr/> Mailing Address 315 Smith Street, Apt. 3 <hr/> City Brooklyn State NY Zip Code 11231 <hr/> Purpose of Disbursement State Election Communication Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB189 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 300.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Robert Brigham <hr/> Mailing Address 1415 Sheridan, #21 <hr/> City Chico State CA Zip Code 95926 <hr/> Purpose of Disbursement State Election Communication Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB132 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Continental Colorcraft <hr/> Mailing Address 1166 West Garvey <hr/> City Monterey State CA Zip Code 91754 <hr/> Purpose of Disbursement State Election Communication Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB159 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 799.96
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2099.96

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A. Full Name (Last, First, Middle Initial) Feminist Majority Mailing Address 433 S. Victory Blvd. City State Zip Code Beverly Hills CA 90212 Purpose of Disbursement State Election Communication Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: EXPB194 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 125.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ogilvy Public Relations Worldwide Mailing Address 1414 K Street, Suite 300 City State Zip Code Sacramento CA 95814 Purpose of Disbursement State Election Communication Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: EXPB175 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 7000.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Political Data Inc. Mailing Address 825 South Victory Blvd. City State Zip Code Burbank CA 91502 Purpose of Disbursement State Election Communication Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: EXPB246 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 47.69
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

7172.69

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A. Full Name (Last, First, Middle Initial) Progressive Victory Mailing Address 4111 Sunset Blvd., Suite 342 City Los Angeles State CA Zip Code 90029 Purpose of Disbursement State Election Communication Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB191 Date of Disbursement 11 / 17 / 2010
	Amount of Each Disbursement this Period 780.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) TeleRoots Technologies, Inc. Mailing Address 333 Washington Avenue, #100 City Minneapolis State MN Zip Code 55401 Purpose of Disbursement State Election Communication Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB127 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 6500.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) The Spoken Hub Mailing Address 1001 G Street, NW, Suite 400E City Washington State DC Zip Code 20001 Purpose of Disbursement Robo Calls Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB255 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 6.03
	24E Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

7286.03

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 53 / 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A.	Full Name (Last, First, Middle Initial) Paul Wittenberg	Transaction ID: EXPB128
	Mailing Address 167 Berkshire Court	Date of Disbursement 10 / 21 / 2010
	City San Ramon State CA Zip Code 94582	Amount of Each Disbursement this Period 9275.00
	Purpose of Disbursement State Election Communication Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Paul Wittenberg	Transaction ID: EXPB136
	Mailing Address 167 Berkshire Court	Date of Disbursement 10 / 29 / 2010
	City San Ramon State CA Zip Code 94582	Amount of Each Disbursement this Period 1250.00
	Purpose of Disbursement State Election Communication Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

10525.00

TOTAL This Period (last page this line number only) ►

29616.35

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Matthew Luotto	Nature of Debt (Purpose): Editing for DVD Clips
Mailing Address 454 9th Avenue	
City State ZIP Code Menlo Park CA 94025	

Outstanding Balance Beginning This Period 0.00	Transaction ID: PAYD205	
Amount Incurred This Period 390.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 390.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planet Kelly	Nature of Debt (Purpose): Mailer
Mailing Address 2425 Meadowbrook Road	
City State ZIP Code Sacramento CA 95825	

Outstanding Balance Beginning This Period 29944.98	Transaction ID: PAYD1	
Amount Incurred This Period 0.00	Payment This Period 29944.98	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planet Kelly	Nature of Debt (Purpose): Mailer
Mailing Address 2425 Meadowbrook Road	
City State ZIP Code Sacramento CA 95825	

Outstanding Balance Beginning This Period 28571.76	Transaction ID: PAYD46	
Amount Incurred This Period 0.00	Payment This Period 28571.76	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	390.00
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

A. Form/Schedule : **SD10**

Previously reported as esimate for 10/29/10 - 11/2/10

Transaction ID : **PAYD205**

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planet Kelly			Nature of Debt (Purpose): Shipping for Mailers
Mailing Address 2425 Meadowbrook Road			
City Sacramento	State CA	ZIP Code 95825	

Outstanding Balance Beginning This Period 2500.00		Transaction ID: PAYD138	
Amount Incurred This Period 0.00	Payment This Period 2500.00	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Brianna Schwanke			Nature of Debt (Purpose): Blogging for DVD Clips
Mailing Address 147 Lexington Ave			
City Redwood City	State CA	ZIP Code 94062	

Outstanding Balance Beginning This Period 0.00		Transaction ID: PAYD208	
Amount Incurred This Period 61.25	Payment This Period 0.00	Outstanding Balance at Close of This Period 61.25	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Blue Deal Inc.			Nature of Debt (Purpose): Shipping of Materials
Mailing Address P.O. Box 2705			
City Fairfax	State VA	ZIP Code 22031	

Outstanding Balance Beginning This Period 157.72		Transaction ID: PAYD211	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 157.72	

1) SUBTOTALS This Period This Page (optional).....	▶	218.97
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

B. Form/Schedule : **SD10**

Previously reported as esimate for 10/29/10 - 11/2/10

Transaction ID : **PAYD208**

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 58 / 58
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Blue Deal Inc.			Nature of Debt (Purpose): State Election Communicat- ion
Mailing Address P.O. Box 2705			
City Fairfax	State VA	ZIP Code 22031	

Outstanding Balance Beginning This Period		Transaction ID: PAYD212	
157.72			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	157.72	

1) SUBTOTALS This Period This Page (optional).....	▶	157.72
2) TOTALS This Period (last page this line number only).....	▶	766.69
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	766.69