

**555 Capitol Mall, Suite 1425
Sacramento, California 95814**

Phone: (916) 442-2952
Fax: (916) 442-1280
info@olsonhagel.com
www.olsonhagel.com

Olson Hagel & Fishburn LLP

Fax

To: Federal Election Commission

From: Dawn Huck

Fax: (202) 219-0174

Date: October 21, 2008

Phones:**Pages:** 6 (Including Cover Page)

Re: Planned Parenthood Advocates Mar

CC:

Monte - FEC ID: C90007311

☒ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

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Fax Filing FEC Form 5

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10-21-08 02:34pm From-

T-858 P.002/008 F-487

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation Planned Parenthood Advocates Mar Monte		3. FEC Identification Number C 9 0 0 0 7 3 1 1
(b) Address (number and street) <input checked="" type="checkbox"/> check if different than previously reported 1805 The Alameda		
(c) City, State and ZIP Code San Jose, CA 95126		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report☐ July 15 Quarterly Report☐ October 15 Quarterly Report☐ January 31 Year-End Report☒ 24-Hour Report☐ 48-Hour Report(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

10 20 2008

THROUGH

10 20 2008

6. TOTAL CONTRIBUTIONS

7. 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 for authorized committee or agent of either, or any political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Deborah Ortiz, VP Public Affairs

SIGNATURE

DATE

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §497g.

For further information, contact:

Federal Election Commission, 990 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1700

FEC Schedule 5 (rev. 09/2005)

28039884078

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

PAGE 2 OF 5

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 FILER (In Full)

Planned Parenthood Advocates Mar Monte

A. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Date of Receipt

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

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

Mailing Address

City

State

Zip Code

Date of Receipt

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

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

Mailing Address

City

State

Zip Code

Date of Receipt

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

D. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Date of Receipt

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

SUBTOTAL of Receipts This Page (optional) ▶

0 0

TOTAL This Period (last page carry total to Line 6) ▶

0 0

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 57.264

FOR LINE 7 OF FORM 5

NAME OF FILER (in Full)

Planned Parenthood Advocates Mar Monte

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

JPM & M, Inc.

Date

1 0 2 0 2 0 0 8

Mailing Address

921 11th Street, Suite 819

Amount

2 2 9 5 8 4 0

City

State

Zip Code

Sacramento, CA 95814

Purpose of Expenditure

Mailer

Category/
Type 0 0 6

Office Sought:

☒ House

State: CA

☐ Senate

District: 4

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Tom McClintock

Calendar Year-To-Date Per Election
for Office Sought

2 3 2 5 9 2 0

Disbursement For:

☐ Primary☒ General

Other (specify) ▶

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

Planned Parenthood Mar Monte

Date

1 0 2 0 2 0 0 8

Mailing Address

1605 The Alameda

Amount

1 0 5 0 0 0

City

State

Zip Code

San Jose, CA 95126

Purpose of Expenditure

Phone Bank & Canvassing

Category/
Type 0 0 7

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Barack Obama

Calendar Year-To-Date Per Election
for Office Sought

2 1 0 0 0 0

Disbursement For:

☐ Primary☒ General

Other (specify) ▶

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

Planned Parenthood Mar Monte

Date

1 0 2 0 2 0 0 8

Mailing Address

1605 The Alameda

Amount

1 0 5 0 0 0

City

State

Zip Code

San Jose, CA 95126

Purpose of Expenditure

Phone Bank & Canvassing

Category/
Type 0 0 7

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

John McCain

Calendar Year-To-Date Per Election
for Office Sought

2 1 0 0 0 0

Disbursement For:

☐ Primary☒ General

Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

2 5 0 5 8 4 0

(b) SUBTOTAL of Unitemized Independent Expenditures.....▶

0 0

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

28039884080

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 4 OF 5
 FOR LINE 7 OF FORM 5

NAME OF FILER (in Full)

Planned Parenthood Advocates Mar Monte

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

Date

1 0 2 0 2 0 0 8

Mailing Address

1605 The Alameda

Amount

City

State

Zip Code

San Jose, CA 95126

1 0 5 0 0 0

Purpose of Expenditure

Phone Bank & Canvassing

Category/
Type 0 0 7

Office Sought:

☒ House

State: NV

Senate

District: 2

President

Name of Federal Candidate Supported or Opposed by Expenditure:

Jill Derby

Check One:

☒ Support☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

2 3 0 0 0 0

Disbursement For:

☐ Primary☒ General

Other (specify)

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

Planned Parenthood Mar Monte

Date

1 0 2 0 2 0 0 8

Mailing Address

1605 The Alameda

Amount

City

State

Zip Code

San Jose, CA 95126

1 0 5 0 0 0

Purpose of Expenditure

Phone Bank & Canvassing

Category/
Type 0 0 7

Office Sought:

☒ House

State: NV

Senate

District: 2

President

Name of Federal Candidate Supported or Opposed by Expenditure:

Dean Heller

Check One:

☐ Support☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

2 3 0 0 0 0

Disbursement For:

☐ Primary☒ General

Other (specify)

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

Planned Parenthood Mar Monte

Date

1 0 2 0 2 0 0 8

Mailing Address

1605 The Alameda

Amount

City

State

Zip Code

San Jose, CA 95126

2 0 0 0 0

Purpose of Expenditure

Stickers

Category/
Type 0 0 6

Office Sought:

☒ House

State: NV

Senate

District: 2

President

Name of Federal Candidate Supported or Opposed by Expenditure:

Dean Heller

Check One:

☐ Support☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

2 3 0 0 0 0

Disbursement For:

☐ Primary☒ General

Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

2 3 0 0 0 0

(b) SUBTOTAL of Unitemized Independent Expenditures

0 0

(c) TOTAL Independent Expenditures

(carry total from last page forward to Line 7)

28039884081

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 5 OF 57,264
 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Planned Parenthood Advocates Mar Monte

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

Date

10/20/2008

Mailing Address

1605 The Alameda

Amount

30080

City

State

Zip Code

San Jose, CA 95126

Purpose of Expenditure

Staff Services

Category/
Type 006

Office Sought:

☒ House

State: CA

☐ Senate

District: 4

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Tom McClintock

Calendar Year-To-Date Per Election
for Office Sought

2325920

Disbursement For:

☐ Primary☒ General

Other (specify) ▶

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

Date

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary☐ General

Other (specify) ▶

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

Date

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary☐ General

Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

30080

(b) SUBTOTAL of Unitemized Independent Expenditures.....▶

00

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

2765920

28039884082

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