

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>PLANNED PARENTHOOD ACTION PAC NORTH CAROLINA</b>		3. FEC Identification Number <b>C</b> C90016767
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 100 S. BOYLAN AVE		
(c) City, State and ZIP Code RALEIGH NC 27603		2. Occupation and Name of Employer (for Individual Filers Only)

4. TYPE OF REPORT (check appropriate boxes):

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report  24-Hour Report
- October 15 Quarterly Report  48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment?  No  Yes, it amends the report filed on

M M	/	D D	/	Y Y Y Y

5. COVERING PERIOD:

FROM	M M	/	D D	/	Y Y Y Y
	10		26		2016
THROUGH	M M	/	D D	/	Y Y Y Y
	11		08		2016

6. TOTAL CONTRIBUTIONS.....

510000.00
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7. TOTAL INDEPENDENT EXPENDITURES .....

147075.91
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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 any political party committee or its agent.

**TYPE OR PRINT NAME OF PERSON COMPLETING FORM**

**SIGNATURE**

**DATE**

*[Electronically Filed]*

Long, Nancy, , ,

Long, Nancy, , ,

10/27/2016

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

**SCHEDULE 5-A  
ITEMIZED RECEIPTS**

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 ACTION PAC NORTH CAROLINA

<b>A. Full Name (Last, First, Middle Initial)</b> Planned Parenthood Action Fund, Inc			Date of Receipt 10 / 25 / 2016		
Mailing Address 123 William Street No 10 Fl			<b>Transaction ID : F56.000001</b>		
City	State	Zip Code	Amount of Each Receipt this Period 510000.00		
New York	NY	10038			
FEC ID number of contributing federal political committee.		C			
Name of Employer			Occupation		

<b>B. Full Name (Last, First, Middle Initial)</b>			Date of Receipt		
Mailing Address			M M M / D D D / Y Y Y Y Y Y		
City	State	Zip Code	Amount of Each Receipt this Period		
			M M M / D D D / Y Y Y Y Y Y		
FEC ID number of contributing federal political committee.		C			
Name of Employer			Occupation		

<b>C. Full Name (Last, First, Middle Initial)</b>			Date of Receipt		
Mailing Address			M M M / D D D / Y Y Y Y Y Y		
City	State	Zip Code	Amount of Each Receipt this Period		
			M M M / D D D / Y Y Y Y Y Y		
FEC ID number of contributing federal political committee.		C			
Name of Employer			Occupation		

<b>D. Full Name (Last, First, Middle Initial)</b>			Date of Receipt		
Mailing Address			M M M / D D D / Y Y Y Y Y Y		
City	State	Zip Code	Amount of Each Receipt this Period		
			M M M / D D D / Y Y Y Y Y Y		
FEC ID number of contributing federal political committee.		C			
Name of Employer			Occupation		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	510000.00
<b>TOTAL</b> This Period (last page carry total to Line 6) .....	510000.00

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
PLANNED PARENTHOOD ACTION PAC NORTH CAROLINA

Full Name (Last, First, Middle Initial) of Payee Community Outreach Group, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 26 / 2016	
Mailing Address 1110 Vermont Ave NW Ste 300		Amount 139380.91	
City Washington	State DC	Zip Code 20005	Transaction ID : F57.000001
Purpose of Expenditure Paid Canvass	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 169219.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name (Last, First, Middle Initial) of Payee Mack-Sumner Communications, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 26 / 2016	
Mailing Address 2001 N Beaugard St Ste 420		Amount 7695.00	
City Alexandria	State VA	Zip Code 22311	Transaction ID : F57.000002
Purpose of Expenditure Door Hangers	Category/Type 006	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Ross, Deborah, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 176914.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	147075.91
(b) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	147075.91