

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
Planned Parenthood Action Fund Inc. PAC

ADDRESS (number and street) 1780 Massachusetts Ave. NW
 Check if different than previously reported. (ACC)
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00314617
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:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 06 01 2006 through 06 30 2006

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 Chris Korsmo

Signature of Treasurer Electronically Filed by Chris Korsmo Date 08 11 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Planned Parenthood Action Fund Inc. PAC

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">45907.92</td></tr></table>	45907.92
Y	Y	Y	Y									
2	0	0	6									
45907.92												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">49567.19</td></tr></table>	49567.19										
49567.19												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">1292.63</td></tr></table>	1292.63	<table border="1" style="width: 100%;"><tr><td align="right">32374.61</td></tr></table>	32374.61								
1292.63												
32374.61												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">50859.82</td></tr></table>	50859.82	<table border="1" style="width: 100%;"><tr><td align="right">78282.53</td></tr></table>	78282.53								
50859.82												
78282.53												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">14669.71</td></tr></table>	14669.71	<table border="1" style="width: 100%;"><tr><td align="right">42092.42</td></tr></table>	42092.42								
14669.71												
42092.42												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">36190.11</td></tr></table>	36190.11	<table border="1" style="width: 100%;"><tr><td align="right">36190.11</td></tr></table>	36190.11								
36190.11												
36190.11												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">.00</td></tr></table>	.00										
.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">.00</td></tr></table>	.00										
.00												

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Planned Parenthood Action Fund Inc. PAC

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	1000.00	25600.00
(i) Itemized (use Schedule A) .....	.00	4804.00
(ii) Unitemized	1000.00	30404.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	1000.00	30404.00
12. Transfers From Affiliated/Other Party Committees .....	.00	.00
13. All Loans Received .....	.00	.00
14. Loan Repayments Received .....	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	148.05	1074.12
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.)	144.58	896.49
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	.00	.00
(b) Levin Funds (from Schedule H5) .....	.00	.00
(c) Total Transfer (add 18(a) and 18(b)).	.00	.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1292.63	32374.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1292.63	32374.61

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	.00	.00
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures.....	169.71	2027.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	169.71	2027.42
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	14500.00	39500.00
24. Independent Expenditure (use Schedule E) .....	.00	.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	.00	.00
27. Loans Made.....	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	.00	565.00
(b) Political Party Committees	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	.00	565.00
29. Other Disbursements.....	.00	.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	.00	.00
(ii) "Levin" Share .....	.00	.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	.00	.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	.00	.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	14669.71	42092.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	14669.71	42092.42

DETAILED SUMMARY PAGE
of Disbursements

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)	1000.00	30404.00
34. Total Contribution Refunds (from Line 28(d)) .....	.00	565.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1000.00	29839.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	169.71	2027.42
37. Offsets to Operating Expenditures (from Line 15, page 3)	148.05	1074.12
38. Net Operating Expenditures (subtract Line 37 from Line 36)	21.66	953.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 16	
	(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"/> 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)
Planned Parenthood Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)
Ms. Cecile Richards

Mailing Address 6201 Utah Avenue NW

City State Zip Code
Washington DC 20015

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

Name of Employer
Planned Parenthood Fed. of America

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	6

Transaction ID: A2006-1

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 / 16	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)
Planned Parenthood Action Fund Inc.

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1074.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	4	/	2	0	0	6

Transaction ID: A5502

Amount of Each Receipt this Period
148.05

Reimbursement for Administrative Expenses

SUBTOTAL of Receipts This Page (optional)	▶	148.05
TOTAL This Period (last page this line number only)	▶	148.05

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 16	
	(check only one)	
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)
Bank of New York

Mailing Address One Wall Street

City State Zip Code
New York NY 10286

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
896.49

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	6

Transaction ID: A5501

Amount of Each Receipt this Period
144.58

Bank Interest Earned

SUBTOTAL of Receipts This Page (optional)	144.58
TOTAL This Period (last page this line number only)	144.58

**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

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. Citicorp Payment Services Inc.		Transaction ID: B144617 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6
Mailing Address 14000 Citi Cards Way		Amount of Each Disbursement this Period 35.00
City Jacksonville State FL Zip Code 32258	Purpose of Disbursement Merchant Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/ Type

Full Name (Last, First, Middle Initial) B. Citicorp Payment Services Inc.		Transaction ID: B144618 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6
Mailing Address 14000 Citi Cards Way		Amount of Each Disbursement this Period 35.00
City Jacksonville State FL Zip Code 32258	Purpose of Disbursement Merchant Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/ Type

Full Name (Last, First, Middle Initial) C. First Data Merchant Services		Transaction ID: B144619 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address P.O. Box 6600		Amount of Each Disbursement this Period 78.05
City Hagerstown State MD Zip Code 21740	Purpose of Disbursement Equipment Lease Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	148.05
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 10 / 16

<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

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. First Data Merchant Services		Transaction ID: B144620 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 6600		Amount of Each Disbursement this Period 19.99
City Hagerstown State MD Zip Code 21740	Purpose of Disbursement Merchant Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable
Category/Type 001		

Full Name (Last, First, Middle Initial) B. First Data Merchant Services		Transaction ID: B144621 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 6600		Amount of Each Disbursement this Period 1.67
City Hagerstown State MD Zip Code 21740	Purpose of Disbursement Merchant Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable
Category/Type 001		

SUBTOTAL of Disbursements This Page (optional) ►

21.66

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

169.71

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 checked="" 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

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. Betty Sutton for Congress		Transaction ID: B144111 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 1700 W. Market St. #155		Amount of Each Disbursement this Period 1000.00
City Akron State OH Zip Code 44313	Purpose of Disbursement G-2006 U.S. House 13 OH Candidate Name Betty Sutton Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Braley for Congress		Transaction ID: B144112 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 2000.00
City Waterloo State IA Zip Code 50704	Purpose of Disbursement G-2006 U.S. House 1 IA Candidate Name Bruce L Braley Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 1		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Darcy Burner for Congress		Transaction ID: B144113 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address P.O. Box 1090		Amount of Each Disbursement this Period 1000.00
City Carnation State WA Zip Code 98014	Purpose of Disbursement P-2006 U.S. House 8 WA Candidate Name Darcy Burner Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 8		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
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 12 / 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. Friends of Joe Lieberman		Transaction ID: B144114 Date of Disbursement 06 / 29 / 2006
Mailing Address P.O. Box 231294 State House Sq.		Amount of Each Disbursement this Period 1000.00
City State House Square State CT Zip Code 06123	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. Senate CT		
Candidate Name Joe Lieberman		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gillibrand for Congress		Transaction ID: B144115 Date of Disbursement 06 / 29 / 2006
Mailing Address P.O. Box 1279		Amount of Each Disbursement this Period 1000.00
City Hudson State NY Zip Code 12534	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. House 20 NY		
Candidate Name Kirsten E Gillibrand		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Johnson for Congress Cmte		Transaction ID: B144116 Date of Disbursement 06 / 29 / 2006
Mailing Address P.O. Box 1986		Amount of Each Disbursement this Period 1000.00
City New Britain State CT Zip Code 06050	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 05 CT		
Candidate Name Nancy L Johnson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
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 checked="" 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

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. Madrid for Congress		Transaction ID: B144117 Date of Disbursement 06 / 29 / 2006
Mailing Address PO Box 25626		Amount of Each Disbursement this Period 2000.00
City Albuquerque	State NM	
Zip Code 87125	Purpose of Disbursement G-2006 U.S. House 01 NM	
Candidate Name Patricia Madrid	Category/ Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NM	District: 01	

Full Name (Last, First, Middle Initial) B. Menendez for Senate		Transaction ID: B144118 Date of Disbursement 06 / 29 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 1000.00
City Union City	State NJ	
Zip Code 07087	Purpose of Disbursement G-2006 U.S. Senate NJ	
Candidate Name Robert Menendez	Category/ Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ	District:	

Full Name (Last, First, Middle Initial) C. Patrick Murphy for Congress		Transaction ID: B144119 Date of Disbursement 06 / 29 / 2006
Mailing Address P.O. Box 868		Amount of Each Disbursement this Period 1000.00
City Levittown	State PA	
Zip Code 19058	Purpose of Disbursement G-2006 U.S. House 8 PA	
Candidate Name Patrick Murphy	Category/ Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 8	

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. Simmons for Congress		Transaction ID: B144120 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address P.O. Box 268 Drawer 271		Amount of Each Disbursement this Period 1000.00
City Stonington State CT Zip Code 06378	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 02 CT		
Candidate Name Rob Simmons		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Stabenow for US Senate		Transaction ID: B144121 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address P.O. Box 4945		Amount of Each Disbursement this Period 500.00
City East Lansing State MI Zip Code 48826	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. Senate MI		
Candidate Name Debbie Stabenow		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Welch for Congress		Transaction ID: B144122 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address P.O. Box 1086		Amount of Each Disbursement this Period 1000.00
City Montpelier State VT Zip Code 05601	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. House		
Candidate Name Peter Welch		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
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 15 / 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)
Zack Space for Congress Cmte

Mailing Address 714 N. Wooster Ave.

City State Zip Code
Dover OH 44622

Purpose of Disbursement
G-2006 U.S. House 18 OH

Candidate Name
Zachary T Space

Office Sought: House
 Senate
 President
State: OH District: 18

Disbursement For: 2006
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B144123

Date of Disbursement

06 / 29 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

14500.00

Image# 26940290130

Form/Schedule: SA11A1

This report is being amended to add one contribution from an individual (see page 6 for itemization). The addition (and affiliated changes to Summary and Detailed Summary totals) is the only change made to this report. Please update your records accordingly.

Transaction ID:
