

# 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 <b>Nevada Advocates for Planned Parenthood Affiliates</b>		3. FEC Identification Number <b>C C90010729</b>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 550 W Plumb Lane Suite B104		
(c) City, State and ZIP Code Reno NV 89509		
2. <b>Corporate filers only</b>	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Individual filers only</b>	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

/  /

THROUGH

/  /

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 or 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**

**SIGNATURE**

**DATE**

*[Electronically Filed]*

Elisa Cafferata

Elisa Cafferata

01/31/2012

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

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**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)  
Nevada Advocates for Planned Parenthood Affiliates

<b>A.</b> Full Name (Last, First, Middle Initial) Elisa Cafferata			Date of Receipt		
Mailing Address 1929 Watt Street			MM / DD / YYYY 08 / 10 / 2011		
City	State	Zip Code	<b>Transaction ID : 5AC2011-2649769</b>		
Reno	NV	89509	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C			250.00		
Name of Employer NV Advocates for Planned Parenthood Af			Occupation President and CEO		

<b>B.</b> Full Name (Last, First, Middle Initial) Elisa Cafferata			Date of Receipt		
Mailing Address 1929 Watt Street			MM / DD / YYYY 08 / 22 / 2011		
City	State	Zip Code	<b>Transaction ID : 5AC2011-3426756</b>		
Reno	NV	89509	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C			550.00		
Name of Employer NV Advocates for Planned Parenthood Af			Occupation President and CEO		

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Vicki Cowart			Date of Receipt		
Mailing Address 1250 Cherry Street			MM / DD / YYYY 08 / 25 / 2011		
City	State	Zip Code	<b>Transaction ID : 5AC2011-2649771</b>		
Denver	CO	80220	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C			250.00		
Name of Employer Planned Parenthood Of The Rocky Mounta			Occupation President & CEO		

<b>D.</b> Full Name (Last, First, Middle Initial) Ms. Alison Gauden			Date of Receipt		
Mailing Address Post Office Box 10911			MM / DD / YYYY 08 / 11 / 2011		
City	State	Zip Code	<b>Transaction ID : 5AC2011-3426748</b>		
Reno	NV	89510	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C			50.00		
Name of Employer Planned Parenthood Mar Monte			Occupation VP Communications		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page carry total to Line 6) .....	▶	

**SCHEDULE 5-A  
ITEMIZED RECEIPTS**

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NAME OF FILER (In Full)  
Nevada Advocates for Planned Parenthood Affiliates

<b>A. Full Name (Last, First, Middle Initial)</b> Ms. Alison Gaulden			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2011		
Mailing Address Post Office Box 10911			<b>Transaction ID : 5AC2011-3426749</b>		
City	State	Zip Code	Amount of Each Receipt this Period		
Reno	NV	89510	50.00		
FEC ID number of contributing federal political committee.			C		
Name of Employer Planned Parenthood Mar Monte			Occupation VP Communications		

<b>B. Full Name (Last, First, Middle Initial)</b> Brian Menzel			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 23 / 2011		
Mailing Address 1720 Oval Circle			<b>Transaction ID : 5AC2011-2649434</b>		
City	State	Zip Code	Amount of Each Receipt this Period		
Las Vegas	NV	89117	250.00		
FEC ID number of contributing federal political committee.			C		
Name of Employer None			Occupation Retired		

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

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page carry total to Line 6) ..... ▶	1400.00

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Nevada Advocates for Planned Parenthood Affiliates

Full Name (Last, First, Middle Initial) of Payee American Directions Group		Date MM / DD / YYYY 09 / 07 / 2011
Mailing Address 1350 Connecticut Ave NW Ste 1102		Amount 381.30 <b>Transaction ID : 57395763</b>
City Washington	State DC	
Purpose of Expenditure Get Out The Vote calls	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kate Marshall		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 865.95		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special General

Full Name (Last, First, Middle Initial) of Payee American Directions Group		Date MM / DD / YYYY 09 / 12 / 2011
Mailing Address 1350 Connecticut Ave NW Ste 1102		Amount 364.65 <b>Transaction ID : 57395764</b>
City Washington	State DC	
Purpose of Expenditure Get Out The Vote calls	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kate Marshall		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 865.95		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special General

Full Name (Last, First, Middle Initial) of Payee Convio		Date MM / DD / YYYY 09 / 12 / 2011
Mailing Address PO Box 671445		Amount 120.00 <b>Transaction ID : 57395765</b>
City Dallas	State TX	
Purpose of Expenditure Get Out The Vote emails	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Kate Marshall		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 865.95		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special General

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	865.95
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶	
(c) <b>TOTAL</b> Independent Expenditures .....	▶	865.95
(carry total from last page forward to Line 7)		