PAGE 1 / 16

Image# 202001319185353173

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORW 3X	For Other	Than An Au	thorized C	Commit	tee		Office Us	se Only	
NAME OF COMMITTEE (in full)	TYPE OR	PRINT ▼		ole: If typ he lines.	ing, type	12FE4	M5		
Protecting Choice in	California	, a project of	f Planned	l Parer	nthood Aff	iliates of	Californ	ia 	
ADDRESS (number and street		itol Mall, Suite 400							
Check if different than previously reported. (ACC)	Sacramo	ento				CA	95814	<u> </u>	
2. FEC IDENTIFICATION	NUMBER ▼	CI	TY 🛦			STATE A		ZIP CODE	<b>.</b>
C C00556860			IS THIS REPORT		NEW (N) <b>OR</b>		AMENDED (A)		
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	(b) Moi Rep Due	oort Ma	b 20 (M2) ar 20 (M3) r 20 (M4)		May 20 (M5) Jun 20 (M6) Jul 20 (M7)	s	ug 20 (M8) ep 20 (M9) ect 20 (M10)	(N Ye D (N Ye	lov 20 (M11) lon-Election par Only) ecc 20 (M12) lon-Election par Only) an 31 (YE)
April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31	t (Q2)	12-Day PRE-Election Report for the:		rimary (12		-	ral (12G)	in the State of	unoff (12R)
Year-End Report July 31 Mid-Year Report (Non-ele Year Only) (MY Termination Rep (TER)	ection (d)	30-Day POST-Election Report for the:		eneral (30	OG)	Runof	f (30R)	_	pecial (30S)
5. Covering Period	M M / D 01	2019		through	M - M 06	30	/		
I certify that I have examined Type or Print Name of Treas	Ragsac,	ind to the best o Nikki, , ,	f my knowle	edge and	belief it is tru	ue, correct	and comple	te.	
Signature of Treasurer	Ragsac, Nikki, , ,		[El	lectronical	lly Filed] [	Date 01			2020
NOTE: Submission of false, en	rroneous, or inc	omplete informatio	on may subje	ect the pe	rson signing t	his Report to	the penalti	es of 52 U.	S.C. § 30109
Office Use Only								FORM Rev. 05/2016	

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

### Protecting Choice in California, a project of Planned Parenthood Affiliates of California

01 2019 06 30 2019 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 60193.20 January 1. 2019 (b) Cash on Hand at 60193.20 Beginning of Reporting Period..... 54281.93 54281.93 Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 114475.13 114475.13 6(a) and 6(c) for Column B)..... 33223.24 33223.24 Total Disbursements (from Line 31)...... 7. Cash on Hand at Close of 8. Reporting Period 81251.89 81251.89 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 639.51 Schedule C and/or Schedule D) ..... 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

### Protecting Choice in California, a project of Planned Parenthood Affiliates of California

01 2019 06 30 2019 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 1500.00 1500.00 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized ..... (iii) TOTAL (add 1500.00 1500.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 52431.93 52431.93 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 53931.93 53931.93 Totals to Line 33, page 5) .....▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 350.00 (Dividends, Interest, etc.)..... 350.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3)..... 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (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))....... 54281.93 54281.93 20. Total Federal Receipts 54281.93 54281.93 (subtract Line 18(c) from Line 19) .......▶

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures:     (a) Allocated Federal/Non-Federal     Activity (from Schedule H4)		Jaistina. 1941 to Sale		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating		1 1 1 1 1 1 1 1		
Expenditures(c) Total Operating Expenditures	32223.24	32223.24		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	32223.24	32223.24		
Transfers to Affiliated/Other Party Committees	0.00	0.00		
Contributions to Federal Candidates/Committees	0.00	0.00		
and Other Political Committees	0.00	0.00		
Independent Expenditures (use Schedule E)	0.00	0.00		
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	200	4 4 4		
(use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other	4 4			
Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(d) Total Contribution Refunds	0.00	0.00		
(add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disbursements (Including				
Non-Federal Donations)	1000.00	1000.00		
Federal Election Activity (52 U.S.C. § 30101(2 (a) Allocated Federal Election Activity (from Schedule H6)	20))			
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	200	0.00		
(c) Total Federal Election Activity (add	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	33223.24	33223.24		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	33223.24	33223.24		

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)	or dispursements	Page 5
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)	53931.93	53931.93
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	53931.93	53931.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	32223.24	32223.24
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32223.24	32223.24

### : 97 'A - G7 9 @ 5 B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC F H Z G7 < 98 I @ 'C F' + H9 A - N5 H-C B

Form/Schedule: F3XA
Transaction ID:

Schedule A - All contributions received through conduit Planned Parenthood Northern California Action Fund, 2185 Pacheco Street, Concord, CA 94520

Form/Schedule: Transaction ID:

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

Use separate schedule(s) for each category of the

l	TOTAL HOMBETS				PAGE	=	7	OF	16		
l	(0	che	ck only	or	ne)						
l		X	11a		11b		11c		12	2	
l			13		14		15		16	6	17

Detailed Summary Page 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, a project of Planned Parenthood Affiliates of California Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Campbell Strategy and Advocacy, LLC Date of Receipt Mailing Address 1414 K Street, Suite 470 2019 03 City Zip Code State Transaction ID: INCA1135 CA Sacramento 95814 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... 1500.00 TOTAL This Period (last page this line number only).....

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

	FC	DR	LINE	NU	MBER	:	PAGE		8	OF		16
Use separate schedule(s) for each category of the	(cl	(check only one)										
Detailed Summary Page			11a		11b	×	11c		12			
			13		14		15		16			17
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.												
f Planned Parenthood Affiliates of California												

			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Protecting Choice in Ca	lifornia, a project o	of Planned Parentho	od Affiliates of California
Full Name of Individual (Last, First Californians Allied for Patient		ganization Name	Date of Receipt
Mailing Address 1215 K Street, Su	ite 2015		05 30 / Y Y Y Y Y Y
City Sacramento	State CA	Zip Code 95814	Transaction ID : INCA1134  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	rear-to-Date ▼	
Full Name of Individual (Last, First Planned Parenthood Advo Mailing Address 555 Capitol Mall, S	cates Mar Monte Car		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sacramento	State CA	Zip Code 95814	Transaction ID : INCA1114  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	7000.00	
Name of Employer (for Individual)	Оссир	pation (for Individual)	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 51431.93	
Full Name of Individual (Last, First Planned Parenthood Adv			Date of Receipt
Mailing Address 555 Capitol Mall,	Suite 1425		06 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sacramento	State CA	Zip Code 95814	Transaction ID : INCA1136  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		6500.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Y	rear-to-Date ▼ 51431.93	
SUBTOTAL of Receipts This Page (	optional)		14500.00
TOTAL This Period (last page this li	ne number only)		

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

	F	OR	LINE	NU	MBER	:	PAGE	9	OF	16	
Use separate schedule(s)	(0	che	ck only	or	ıe)						_
for each category of the Detailed Summary Page			11a		11b	X	11c	12			
			13		14		15	16		17	
not be sold or used by any pedress of any political committee											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood Affiliates of California Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Planned Parenthood Advocates Mar Monte Candidate PAC Date of Receipt Mailing Address 555 Capitol Mall, Suite 1425 2019 10 City Zip Code State Transaction ID: INCA1139 CA Sacramento 95814 Amount of Each Receipt this Period FEC ID number of contributing 4742.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 51431.93 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Planned Parenthood Advocates Mar Monte Candidate PAC Date of Receipt Mailing Address 555 Capitol Mall, Suite 1425 10 2019 City State Zip Code Transaction ID: INCA1141 CA Sacramento 95814 Amount of Each Receipt this Period FEC ID number of contributing 800.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 51431.93 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Planned Parenthood Advocates Mar Monte Candidate PAC Date of Receipt Mailing Address 555 Capitol Mall, Suite 1425 18 2019 City State Zip Code Transaction ID: INCA1140 CA Sacramento 95814 Amount of Each Receipt this Period FEC ID number of contributing C 32389.93 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 51431.93 Other (specify) 37931.93 SUBTOTAL of Receipts This Page (optional)..... 52431.93 TOTAL This Period (last page this line number only).....

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

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

	F	OR	LINE	NU	MBER	:	PAGE		10 OF	1	16
Use separate schedule(s)	(0	(check only one)									
for each category of the Detailed Summary Page			11a		11b		11c		12		
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not be sold or used by any pe ress of any political committee											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood Affiliates of California Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Planned Parenthood Votes Date of Receipt Mailing Address 123 William Street, 10th Floor 2019 17 City Zip Code State Transaction ID: INCA1122 NY New York 10038 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Void Check Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ General Primary Other (specify) 350.00 SUBTOTAL of Receipts This Page (optional)..... 350.00

### S 17

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:	PAGE 11 OF 16
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	—	
		Summary Page	<b>X</b> 21b 28a	22 23 28c 28c	26 27 29 30b
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NAME OF COMMITTEE (In Full)					
Protecting Choice in California, a	project o	f Planned Pa	arenthood .	Affiliates of Cal	ifornia
Full Name (Last, First, Middle Initial)				Data of Diahumaan	
A. Planned Parenthood Affiliates of (	Jalifornia	<b>)</b>		Date of Disbursem	/ Y Y Y Y Y
Mailing Address 555 Capitol Mall, Suite 510				01 03	2019
City	State	Zip Code		FEC Identification	Number
Sacramento	CA	95814			
Purpose of Disbursement Salary			001	C	
Candidate Name				Transaction II	-
-			Category/ Type	Amount of Each D	isbursement this Period
Office Sought: House Disburse	ement For:		· · · · · · · · · · · · · · · · · · ·		596.59
Senate	Primary	General			7
President	Other (spe	ecify) 🔻		Memo Item	
State: District:					
Full Name (Last, First, Middle Initial)  B. Planned Parenthood Affiliates of (	ا ماناده سماد			Date of Disbursem	ent
B. Planned Parenthood Affiliates of 0	alifornia	d			
Mailing Address 555 Capitol Mall, Suite 510				01 03	2019
City	State	Zip Code		FEC Identification	Number
Sacramento	CA	95814			Tullion .
Purpose of Disbursement Salary			001	C	
Candidate Name				Transaction II	-
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Office Sought: House Disburse	ement For:	I	71		1743.66
Senate	Primary	General			7-1-1-4-1-1
President	Other (spe	ecify)		Memo Item	
State: District:					
Full Name (Last, First, Middle Initial)  C. Planned Parenthood Affiliates of (	California	1		Date of Disbursem	ent
Mailing Address 555 Capitol Mall, Suite 510				01 03	/ Y Y Y Y Y 2019
				01 00	2010
City	State	Zip Code		FEC Identification	Number
Sacramento Purpose of Disbursement	CA	95814			
Travel Expenses			002	Transaction II	D : EXPB1124
Candidate Name			Category/ Type		isbursement this Period
Office Sought: House Disburse	ement For:		1,900		5320.70
Senate	Primary	General			4 4
President	Other (spe	ecify) 🔻		Memo Item	
State: District:	_				
SUPTOTAL of Disburgaments This Dags (artists)					7660.95
SUBTOTAL of Disbursements This Page (optional)			·····•		7
TOTAL This Period (last page this line number only	v)				

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	ny information copied from such Reports and Staten for commercial purposes, other than using the nam							
	NAME OF COMMITTEE (In Full)			<u> </u>				
	Protecting Choice in California, a p	roject of	Planned Pa	arenthood .	Affiliates of California			
٨	Full Name (Last, First, Middle Initial)				Data of Dishursoment			
A.	SMG Food and Beverage, LLC				Date of Disbursement			
	Mailing Address 747 Howard Street				05 21 2019			
	,	State	Zip Code		FEC Identification Number			
	San Francisco Purpose of Disbursement	CA	94103		0			
	Fundraising Event			003	C			
	Candidate Name				Transaction ID : EXPB1133			
				Category/ Type	Amount of Each Disbursement this Period			
	Office Sought: House Disburser	nent For:			4010.81			
	Senate	Primary	General					
	President	Other (spec	eify) 🔻		Memo Item			
_	State: District:							
R	Full Name (Last, First, Middle Initial)				Date of Disbursement			
υ.	NightGallery, LLC dba Mezzanine							
	Mailing Address 444 Jessie Street				05 28 2019			
	The second cheek							
	,	State	Zip Code		FEC Identification Number			
	San Francisco Purpose of Disbursement	CA	94103					
	Fundraising Event Rental			003	C			
	Candidate Name				Transaction ID : EXPB1101			
				Category/ Type	Amount of Each Disbursement this Period			
	Office Sought: House Disbursen	nent For:	I.		3405.48			
	Senate	Primary	General					
	President	Other (spec	eify)		Memo Item			
_	State: District:							
C.	Full Name (Last, First, Middle Initial)  NightGallery, LLC dba Mezzanine				Date of Disbursement			
					M M / D D / Y Y Y Y			
	Mailing Address 444 Jessie Street				05 28 2019			
	City	State	Zip Code		FEC Identification Number			
	San Francisco	CA	94103					
	Purpose of Disbursement Fundraising Event Rental			003	C			
	Candidate Name				Transaction ID : EXPB1161			
				Category/ Type	Amount of Each Disbursement this Period			
	Office Sought: House Disburser	nent For:		. 7	13000.00			
	Senate	Primary	General		7 7 7			
	President	Other (spec	sify) ▼		Memo Item			
_	State: District:							
5	SUBTOTAL of Disbursements This Page (optional)			<b>&gt;</b>	20416.29			
$\vdash$								
1	<b>'OTAL</b> This Period (last page this line number only)				1			

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Use separate schedule(s)   FOR LINE NUMBER:   FOR	SCHEDULE B (FEC Form 3X)			EOD LINE	NE NUMBER: PAGE 13 OF 16				
Any information copied from such Raports and Statements may not be sold or used by any person for the purpose of seliciting contributions from such recommending improses, 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, a project of Planned Parenthood Affiliates of California  Full Name (Last, First, Middle Initial)  A. NightGallery, LLC dba Mezzanine  Mailing Address 444 Jessie Street  City San Francisco  Office Sought: House   Disbursement For:   State   Primary   General   Other (specify)   Vision   Other (sp	•				TOWELL.				
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, a project of Planned Parenthood Affiliates of California  Full Name (Last, First, Middle Initial) An NightGallery, LLC dba Mezzanine  Mailing Address 444 Jessie Street  City State City State Chestric Sonata Primary Candidate Name  City State District Full Name (Last, First, Middle Initial) City State: District Full Name (Last, First, Middle Initial) City State City State City State Condidate Name  City State Condidate Name  City City State Condidate Name  City Category Type  Office Sought House Primary Candidate Name  City Category Type  Office Sought House Primary Candidate Name  City Category Type  Office Sought House Primary Candidate Name  City Category Type  Office Sought House Primary Candidate Name  City State Condidate Name  City Amount of Each Disbursement  City Category Amount of Each Disbursement this Period  City Category Amount of Each Disbursement  City Category Amount of Each Disbursement  City Category Amount of Each Disbursement this Period  City Category Amount of Each Disbursement  City Category Amount				I - —					
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, a project of Planned Parenthood Affiliates of California  Full Name (Last, First, Middle Initial)  A. NightGallery, LLC dba Mezzanine  Mailing Address 444 Jessie Street  City San Francisco CA 94103 Purpose of Disbursement Fundraising Printing Candidate Name  Office Sought: House Disbursement For: Senate President City State: District  City State Zip Code CA 94103  Purpose of Disbursement Full Name (Last, First, Middle Initial)  B. NightGallery, LLC dba Mezzanine  Mailing Address 444 Jessie Street  City San Francisco CA 94103  President City State: Disbursement Fundraising Event  Candidate Name  Office Sought: House Disbursement For: Sanate Primary General Office Sought: Disfact  Full Name (Last, First, Middle Initial) Candidate Name  Office Sought: House Disbursement For: Sanate Primary General Office Sought: House Disbursement For: Candidate Name  Office Sought: House Disbursement Candidate Name  Office Sought: House Disbursement For: Sanate Primary General Office Sought: House Primary General Office Sought: House Primary General Office Sought: Mome Offic		Dotailed 3	ammary raye	28a	28b 28c 29 30b				
NAME OF COMMITTEE (in Full) Protecting Choice in California, a project of Planned Parenthood Affiliates of California  Full Name (Last, First, Middle Initial)  A. NightGallery, LLC dba Mezzanine  Mailing Address 444 Jessie Street  City San Francisco Candidate Name  Candidate Name  Condidate Name  Cother (specify) ▼  Disbursement For: Senate Primary Call Cother (specify)  San Francisco Chief Cought: Full Name (Last, First, Middle Initial) B. NightGallery, LLC dba Mezzanine  Mailing Address 444 Jessie Street  City San Francisco Chief (specify)  Memo Item  Date of Disbursement  City San Francisco Chief (specify)  San Francisco Chief (specify)  Date of Disbursement  Fundraising Event Candidate Name  City San Francisco Chief (specify)  Fell Name (Last, First, Middle Initial)  Candidate Name  City San Francisco Chief (specify)  Memo Item  Fell Individual Chief (specify)  State  District:  Full Name (Last, First, Middle Initial)  Candidate Name  Candidate Name  City San Francisco Calegory/ Type  Fec Identification Number  Category/ Transaction ID: EXPB1138  Amount of Each Disbursement  Fell Individual Chief (specify)  Memo Item  State:  Subtrotal of Disbursement this Period  Memo Item	Any information copied from such Reports and Stater	ments may no	ot be sold or use	ed by any perso	on for the purpose of soliciting contributions				
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 14 OF 16
ITEMIZED DISBURSEMENTS		parate schedule(s) h category of the	(check only	<i>`</i>
		d Summary Page	21b 28a	22 23 26 27 28b 28c <b>x</b> 29 30b
Any information copied from such Reports and State	tements may	not be sold or us		
or for commercial purposes, other than using the n				
NAME OF COMMITTEE (In Full)				
Protecting Choice in California, a	project (	of Planned Pa	arenthood	Affiliates of California
Full Name (Last, First, Middle Initial)				Date of Disbursement
A. Close the Gap				M M / D D / Y Y Y Y
Mailing Address 555 Bryant Street, #241				01 22 2019
City	State	Zip Code		FEC Identification Number
Palo Alto Purpose of Disbursement	CA	94031		
Civic Donation			012	C
Candidate Name			Category/	Transaction ID : EXPB1126 Amount of Each Disbursement this Period
			Type	
	sement For:			1000.00
Senate	Primary Other (sp	General		
State: President State:	Other (sp	ecity) 🔻		Memo Item
Full Name (Last, First, Middle Initial)				
В.				Date of Disbursement
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Mailing Address				
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement				C
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Candidate Name			Category/	Amount of Each Disbursement this Period
Office Sought: House Bish	omont Fam		Type	
Office Sought: House Disburs Senate	ement For: Primary	General		7 7 7
President	Other (sp			□ M N
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Full Name (Last, First, Middle Initial)				
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Mailing Address				M M / D D / Y Y Y Y
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement				
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Candidate Name			Category/	Amount of Each Disbursement this Period
			Type	Authority of East Pleasardine it and Folia
	sement For:			
Senate President	Primary Other (sp	General		
State: District:	Other (sp	ecity) ▼		Memo Item
2.55				
SUBTOTAL of Disbursements This Page (optional	)			1000.00
				1000.00
TOTAL This Period (last page this line number on	lv)			1000.00

## SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 15 OF 16

FOR LINE NUMBER:
(check only one) 9

x 10

	ME OF COMMITTEE (In Full) rotecting Choice in California, a proj	ect of Pla	nned Parenthood	Affiliates of California	
	A. Full Name (Last, First, Middle Initial) of Debtor  Deane & Company	Nature of Debt (Purpose): Reporting Services			
	Mailing Address 1787 Tribute Road, Suite K				
	City Sacramento	State CA	Zip Code 95815		
	Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD1102			
	Amount Incurred This Period	Payment This Period		Outstanding Balance at Close of This Period	
	562.85	,	0.00	562.85	
•	B. Full Name (Last, First, Middle Initial) of Debtor of Planned Parenthood Affiliates of (	e (Last, First, Middle Initial) of Debtor or Creditor ed Parenthood Affiliates of California		Nature of Debt (Purpose): Staff Time & Website for Voter Guide; 5/19/16 - 6/30/16	
	Mailing Address 555 Capitol Mall, Suite 510				
	City Sacramento	State CA	Zip Code 95814		
	Outstanding Balance Beginning This Period  1.20	Transaction ID : PAYD769			
	Amount Incurred This Period	Payment This Period		Outstanding Balance at Close of This Period	
	0.00		0.00	1.20	
	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planned Parenthood Affiliates of California			Nature of Debt (Purpose): Staff Time & Website for Voter Guide; 5/19/16 - 6/30/16	
Ī	Mailing Address 555 Capitol Mall, Suite 510				
	City Sacramento	State CA	Zip Code 95814		
	Outstanding Balance Beginning This Period 32.66	Transaction ID : PAYD770			
	Amount Incurred This Period Payment This Period		Outstanding Balance at Close of This Period		
	0.00	7	0.00	32.66	
1)	SUBTOTALS This Period This Page (optional)			596.71	
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 lin	ne of Summa	ry Page (last page only) ▶		

### SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

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

PAGE 16 OF FOR LINE NUMBER: (check only one) 9 **X** 10

16

Protecting Choice in California, a	project of Pla	anned Parenthoo	d Affiliates of California		
A. Full Name (Last, First, Middle Initial) of De Planned Parenthood Affiliate	Nature of Debt (Purpose): Website & Voter Guide Various Unitemized Candidates				
Mailing Address 555 Capitol Mall, Suite 510	lailing Address 555 Capitol Mall, Suite 510				
City Sacramento	State CA	Zip Code 95814			
Outstanding Balance Beginning This Period  42.80  Amount Incurred This Period		yment This Period	Transaction ID : PAYD796  Outstanding Balance at Close of This Period		
0.00	0.		42.80		
B. Full Name (Last, First, Middle Initial) of De	3. Full Name (Last, First, Middle Initial) of Debtor or Creditor				
Mailing Address	Mailing Address				
City	State	Zip Code			
Outstanding Balance Beginning This Period  Amount Incurred This Period		yment This Period	Outstanding Balance at Close of This Period		
C. Full Name (Last, First, Middle Initial) of D	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor				
Mailing Address					
City	State	Zip Code			
Outstanding Balance Beginning This Period  Amount Incurred This Period Payment This Period			Outstanding Balance at Close of This Period		
1) SUBTOTALS This Period This Page (optional	l)		42.80		
2) TOTALS This Period (last page this line num	TOTALS This Period (last page this line number only)				
3) TOTAL OUTSTANDING LOANS from Sched	TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ 639.51					