

# 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 Planned Parenthood Central Coast Action Fund		3. FEC Identification Number  C C90006701
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 518 Garden Street		
(c) City, State and ZIP Code Santa Barbara, CA 93101		
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 11 04 2014

5. COVERING PERIOD:  
 FROM 10 31 2016  
 THROUGH 11 03 2016

6. TOTAL CONTRIBUTIONS..... 0.00  
 7. TOTAL INDEPENDENT EXPENDITURES ..... 1,815.88

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
Ljora Goodman		01/31/2017

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

NON-CONFIDENTIAL DOCUMENT

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Planned Parenthood Central Coast Action Fund

Full Name (Last, First, Middle Initial) of Payee Facebook, Inc.		Date of Public Distribution/Dissemination MM/DD/YYYY 10/31/2016	
Mailing Address 1 Hacker Way		Amount 400.00	
City Menlo Park, CA 94025	State	Zip Code	
Purpose of Expenditure online ads, 10/31 - 11/8.	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: Salud Carbajal		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1,815.88		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 16 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Central Coast Action Fund		Date of Public Distribution/Dissemination MM/DD/YYYY 10/31/2016	
Mailing Address 518 Garden Street		Amount 19.88	
City Santa Barbara, CA 93101	State	Zip Code	
Purpose of Expenditure Mobile Voter Guide, 9/30 - 11/8. Does not reach \$1,000 until 10/31	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: Salud Carbajal		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1,815.88		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 16 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Central Coast Action Fund		Date of Public Distribution/Dissemination MM/DD/YYYY 10/31/2016	
Mailing Address 518 Garden Street		Amount 672.06	
City Santa Barbara, CA 93101	State	Zip Code	
Purpose of Expenditure Staff time and expenses for phonebanking: 10/5 - 10/10. Does not reach \$1,000 until 10/31	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: Salud Carbajal		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1,815.88		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 16 <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures .....	1,091.94
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures ..... (carry total from last page forward to Line 7)	

2014-10-10 10:00:00 AM

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
Planned Parenthood Central Coast Action Fund

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Central Coast Action Fund		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 / 31 / 2016	
Mailing Address 518 Garden Street City State Zip Code Santa Barbara , CA 93101		Amount 51.02	
Purpose of Expenditure staff time for digital ads; 10/31-11/8.	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Salud Carbajal		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 16 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 1,815.88			

Full Name (Last, First, Middle Initial) of Payee NextDayFlyers.com		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 11 / 03 / 2016	
Mailing Address 8000 Haskell Avenue City State Zip Code Van Nuys , CA 91406		Amount 275.17	
Purpose of Expenditure Printing for walk piece	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Salud Carbajal		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 16 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 1,815.88			

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Central Coast Action Fund		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 11 / 03 / 2016	
Mailing Address 518 Garden Street City State Zip Code Santa Barbara , CA 93101		Amount 397.75	
Purpose of Expenditure staff time for walk piece; 11/3 - 11/8	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Salud Carbajal		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 16 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 1,815.88			

(a) SUBTOTAL of Itemized Independent Expenditures .....	723.94
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	1,815.88

(carry total from last page forward to Line 7)

NON-FUNCTIONING

**Via E-Mail**

NONNUNNOO:WQ:HO:ING:V:HO:ON

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked Date of Receipt

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked  
1/31/17

 2/1/17  
 PREPARER DATE PREPARED

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