## **FEC FORM 5**

## RECEIVED FEC MAIL CENTER

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED To Be Used by Persons (Other than Political Committees) including Qualified Nondership Corporations 8: 29

1.	(a) Name of Individual, Organization or Corporation	7
P	Planned Parenthood Advocates of Wiscon	sin, inc.
	(b) Address (number and street)	
11	1 King St, mule #23	
	(c) City, State and ZIP Code	3. FEC Identification Number
1	Madison, Wi 53703	
2.	Corporate filers only  Is the filer a qualified nonprofit corporation?  Yes  No	С
	Individual filers only Name of Employer	Occupation
	4. TYPE OF REPORT (check appropriate boxes):	<u></u>
	(a) April 15 Quarterly Report	
	July 15 Quarterly Report	
	☐ October 15 Quarterly Report	
	January 31 Year-End Report 48-Hour Report	
	b) Is this Report an amendment? Yes \(\bar{\text{Ves}}\) No \(\bar{\text{Ves}}\)  5. COVERING PERIOD: FROM  \(\bar{\text{V}}\) \(\bar{\text{U}}\)	
	12 31 200 8	
	6. TOTAL CONTRIBUTIONS	1
	7. TOTAL INDEPENDENT EXPENDITURES	21 1 21 11
		26,434.94
11		
sug	der penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation agestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In add the report is a corporation of certify that the corporation is a qualified nonprofit corporation under the Commission's	lition, (if the independent expenditures reported
	PE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
1	JICOLE SAFAR Mich	50- 01/30/09
	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-E ITEMIZED INDEPENDENT EXPENDITURES	PAGE OF 6 FOR LINE 7 OF FORM 5
Planned Parenthood Advocates 1	z Wi, inc.
Full Name (Last, First, Middle Initial) of Payee  Mailing Address	Date 17 2008
Warkesha Wi	Amount , 14-60-80
Purpose of Expenditure  Category/ Type  Name of Federal candidate Supported or Opposed by Expenditure:	Office Sought: House State: Senate District: President
Calendar Year-To-Date Per Election for Office Sought , 1,460.80	Check One: Support Oppose  Disbursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee  W Plstmasty  Malling Address  A15 Martin What King Jr Dr	Date  Amount
Purpose of Expenditure  State  Zip Code  W1 53101  Category/ Categ	
Name of Federal Candidate Supported or Opposed by Expenditure:	Senate  President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought  Full Name (Last, First, Middle Initial) of Payee	Disbursement For: Primary General  Other (specify)
The Merus group  Mailing Address  Li 2 2008 21 12 12 12 12 12 12 12 12 12 12 12 12	- 10 17 2008
City State Zip Code William Wi	488.16
Purpose of Expenditure  Printing direct map  Name of Federal Candidate Supported or Opposed by Expenditure:	Office Sought: House State: Senate District:
Calendar Year-To-Date Per Election for Office Sought	Check One: Support Oppose  Disbursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	> 3609.76
(c) TOTAL Independent Expenditures	3,609.76
t decree of	

Panned Parenthood Advocates of Williams (Last, First, Middle Initial) of Payes	SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES	PAGE OF 6
Full Name (Last, First, Middle Initial) of Payee   White State   Sta		, ,
Maing Address   May In With King Jr Dr   Amount   Maing Address   May In With King Jr Dr   Amount   Maing Address   May In With King Jr Dr   Amount   Maing Address   May In With King Jr Dr   Maing Address	Planned Parenthood Advocates or wi.	inc
Maling Address   Amount   Amount   Amount   Amount   City   State   Zp Code   Maling Address   Amount   State   Zp Code   Amount   Amoun	Full Name (Last, First, Middle Initial) of Payee Date	· · · · · · · · · · · · · · · · · · ·
State   Sp Code   W1   Sate   Sp Code   W1   Sate   Sp Code   W2   State   Sp Code   W2   State   Sp Code   Sp Cod	Mailing Address	5 17 200 8
State   Sp Code   W1   Sate   Sp Code   W1   Sate   Sp Code   W2   State   Sp Code   W2   State   Sp Code   Sp Cod	815 Mustin With King Jr Dr Amount	
Purpose of Expenditure  POS Stage  Name of Foderal Danidate Supported or Opposed by Expenditure:  John McCan  Catendar Year-To-Date Per Election for Office Sought  State  The Clay State  Support  Catendar Year-To-Date Per Election  Full Name (Last, First, Middle Initial) of Payee  Thu Mark  State  Typose of Expenditure  President  Check One:  Support  Coher (specify)  Full Name (Last, First, Middle Initial) of Payee  Thu Mark  State  Typose of Expenditure  President  Check One:  Support  Coher (specify)  Date  Amount  State:  State:  State:  State:  State:  President  Check One:  Support  Office (specify)  Full Name (Last, First, Middle Initial) of Payee  Thu in a direct main  Catendar Year-To-Date Per Election for Office Sought  Gall G44-95  Date  Amount  Catendar Year-To-Date Per Election for Office Sought  Malling Address  Als Middle Initial of Payee  Date  State:  State:  State:  State:  State:  Check One:  Support  Oppose  Disbursement For:  Primary  Catendar Year-To-Date Per Election for Office Sought  Catendar Year-To-Date Per Election for Office Sought  State:	City State Zip Code	69911
Name of Federal Candidate Supported or Opposed by Expenditure:   Support	101000 Son 21 33 101	· · · · · · · · · · · · · · · · · · ·
Name of Federal Candidate Supported or Opposed by Expenditure:    Calendar Year-To-Date Per Election for Office Sought	James Stagens	House State:
Calendar Year-To-Date Per Election for Office Sought  Category'  Category'  Category'  Calendar Year-To-Date Per Election for Office Sought  Category'  Category'  Category'  Category'  Calendar Year-To-Date Per Election for Office Sought  Category'  Category	FUSTAGE.	District:
Calendar Year-To-Date Per Election for Office Sought  Full Name (Last, First, Middle Initial) of Payee  The Name (Last, First, Middle Initial) of Payee  Purpose of Expenditure  Calendar Year-To-Date Per Election for Office Sought  Category/ Type  Category/ Type  Disbursement For: Primary General  Date  District: Dist		
Full Name (Last, First, Middle Initial) of Payee  The Malling Address  Wash NSM West manual Dr.  State Zp Code  Wi Sal Sal Sale  Purpose of Expenditure  Calendar Year-To-Date Per Election for Office Sought  Malling Address  Amount  City  State  Last Sale  Category  Full Name (Last, First, Middle Initial) of Payee  Category  Malling Address  Amount  Check One:  Category  Malling Address  Amount  Cother (specify)  Category  Type  Category  Cate		
Mailing Address  Ward N8M West mond Dr  State Zip Code  Value Mailing Address  Purpose of Expenditure  Calendar Year-To-Date Per Election for Office Sought  Mailing Address  Name of Federal Candidate Supported or Opposed by Expenditure:  Calendar Year-To-Date Per Election for Office Sought  Name of Federal Candidate Supported or Opposed by Expenditure:  Calendar Year-To-Date Per Election for Office Sought  Ni Sanol  Calendar Year-To-Date Per Election for Office Sought	Calendar Year-To-Date Per Election for Office Sought 4,297.93 Disbursement F	. ب
Amount    Category   State   Zip Code	Full Name (Last, First, Middle Initial) of Payee Date	
Amount    Category   State   Zip Code   Supported or Opposed by Expenditure:	The Mark Group	3 3008
Purpose of Expenditure    Category/	WAZE NEXT Westmound Dr Amount	in the court of th
Name of Federal Candidate Supported or Opposed by Expenditure:   Check One:   Csupport   Oppose	State Zp Code	
Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  Full Name (Last; First, Middle Initial) of Payee    Malling Address	Printing direct man Type	Senate District:
Full Name (Last; First, Middle Initial) of Payee    Date		<b>7</b>
Mailing Address  A 15 Nutrin Luthu King dr. Dr.  City State Zip Code  Walish Ni S3701  Purpose of Expenditure  Category/ Type  Name of Federal Candidate Supported or Opposed by Expenditure:  Category/ Type  Check One:  Check One:  Category/ Type  Check One:  Check One:  Check One:  Category/ Type  Check One:  Check One:  Category/ Check One:  Check One:  Check One:  Check One:  Category/ Check One:  Check One:  Check One:  Check One:  Category/ Check One:  Check O	Calendar rear-10-bate Fer Election	
Mailing Address  Amount  City  State  Tip Code  Walish  Purpose of Expenditure  Name of Federal Candidate Supported or Opposed by Expenditure:  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Check One:  Check One:  Category/ Type  Senate District:  President  Check One:  Category/ Type  Senate District:  President  Check One:  Category/ Type  Senate District:  Check One:  Check One:  Category/ Type  Senate District:  Check One:  Check One:  Category/ Type  Senate District:  Check One:  Category/ Type  Senate District:  Check One:  Check One:  Category/ Type  Senate District:  Check One:  Check One:  Check One:  Category/ Type  Senate District:  Check One:  Check One:  Category/ Type  Senate District:  Check One:  Check One:  Category/ Type  Senate District:  Check One:  Category/ Type  Senate District:  Check One:  Check On	Full Name (Last, First, Middle Initial) of Payee Date	
City State Zip Code	Us Postmaster Mailing Address	8 000
City State Zip Code	AIE MARATIN LATINA VINA Las Des Amount	
Purpose of Expenditure    Category/ Type		
Purpose of Expenditure  Category/ Type  Name of Federal Candidate Supported or Opposed by Expenditure:  Calendar Year-To-Date Per Election for Office Sought  Category/ Type  Check One:  Check		1.861.03
Name of Federal Candidate Supported or Opposed by Expenditure:  Check One:  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures.  District:  Check One:  Check One:  President  Check One:  Oppose  Disbursement For:  Other (specify)  Other (specify)	Purpose of Expenditure  Category/ Type  Office Sought:	Senate .
Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures.  Check One: Support Oppose  Disbursement For: Primary  Other (specify)  44323		District:
for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures.  (b) SUBTOTAL of Unitemized Independent Expenditures.		Support Oppose
(b) SUBTOTAL of Unitemized Independent Expenditures	C A 21 A 0	
(b) SUBTOTAL of Unitemized Independent Expenditures	(a) SUBTOTAL of Itemized Independent Expenditures	4.4.2.23
(b) SUBTOTAL of Unitemized Independent Expenditures	Lors is recommended as a second secon	ente antico de la profesión de la contraction de
	(b) SUBTOTAL of Unitemized Independent Expenditures	But the state of the second control of
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	(c) TOTAL Independent Expenditures	4422 22

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES	PAGE 3 OF 6 FOR LINE 7 OF FORM 5
NAME OF FILER (In Full)	•
Planned Parenthood Advocates	of winne.
Full Name (Last, First, Middle Initial) of Payee	Date
Gannett Wisansin Newspapers Malling Address	10 24 2008
Po Box 59 City State Zip Code	Amount  All was as a sum of the second of th
appleton Wi 54912	1,300
Purpose of Expenditure  Category/ Type  Name of Federal Candidate Supported or Opposed by Expenditure:	Office Sought: House State:  Senate District:
	Check One: Support Coppose
Colondor Voor To Date Par Startion	Disbursement For: Primary General
for Office Sought 9,33,1.98	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
The Marck Group  Mailing Address	(0 28 2008
WO28 N821 Westmound Dr	Amount
Wanke 8h State Zip Code Wi 53186	1.781.94
	Office Sought: House State:
Printing	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
D. D	isbursement For: Primary General
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	10 28 2008
WO28 N821 Nestmound DR	Amount
City State Zip Code Walkesha W. 53186	147152
	ffice Sought: House State:
Printing	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	heck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	sbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	4565.96
(b) SUBTOTAL of Unitemized Independent Expenditures	in a construction of a first proper condition found went

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES	PAGE 4 OF 6 FOR LINE 7 OF FORM 5
NAME OF FILER (In Fuil)	
Planned Parenthood advocates of	Wi, inc.
Full Name (Last, First, Middle Initial) of Payee	Date
US Postmester Mailing Address	8006 36 01
dis MLK, dr Dr	Amount
Madism State Zip Code Wil 53701	178794
Purpose of Expenditure Category/ C	Office Sought: House State:
postage	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President  heck One: Support Oppose
John Mic Carn	
Calendar Year-To-Date Per Election for Office Sought	isbursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
US POSTMUSTER Mailing Address	10 28 2008
215 hilk, dr DK	Amount
Madism State Zip Code Wi 53701	1,477.52
Purpose of Expenditure  On Stage  Category/ Type	ffice Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
baraek obama ci	heck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 15 862 3.90	sbursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Activate Mailing Address	10 30 2008
2000 M NT, NW #500	Amount
City State Zip Code	197500
Washington DC 20036	
	fice Sought: House State:
Type was Type	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:  Ch	eck One: Sapport Oppose
Calendar Year-To-Date Per Election for Office Sought 17,137,90	Soursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	514046
(b) SUBTOTAL of Unitemized Independent Expenditures	garan panan perana ragaman panan panan panan penangan penangan panan penangan penangan penangan penangan penang Penangan penangan
(c) TOTAL Independent Expenditures	5140.46

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 5 OF 6
NAME OF FILER (In Full)	POR EINE 7 OF TOTAL
Planned Parenthood advocates of	Wiline.
Full Name (Last, First, Middle Initial) of Payee	Date
The Marek group	11 19 2008
W 228 N 821 Westmound Dr City State Zip Code	Amount  Management of the second of the seco
Wankerra Wi 53186	3896.64
Purpose of Expenditure  Category/ Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President  Check One: Support Oppose
.1 '	isbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
The Marck Simp	111119 2008
WOOD NEOL Westmand Dr	Amount
Waukerha Wi 53186	, 451.88
Prinny	House State: Wi Senate District: 08
Name of Federal Candidate Supported or Opposed by Expenditure:	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought	sbursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
US POSTMASTER	11 19 2008
215 martin Luther King JR Dr	Amount
Madism State Zip Code WL 53701	3896.64
Purpose of Expenditure  Category/ Type  Type	fice Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure:	President  Support Oppose
	sbursement For: Primary General
Same to and a mathematical for the state of	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	8 245.16
(b) SUBTOTAL of Unitemized Independent Expenditures	gal to find a finding to the control of the control of the same part of the control of the contr
(c) TOTAL Independent Expenditures	8.245.16

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 6 OF 6 FOR LINE 7 OF FORM 5
NAME OF FILER (In Full)	
Planned Peneuthood advocates of	, wi, mc.
Full Name (Last, First, Middle Initial) of Payee	Date
US Postmasty Mailing Address	11 19 2008
215 NILK, or Dr	Amount
City State Zip Code Walison WC 53701	, .451.88
Purpose of Expenditure Category/	Office Sought: House State: W
Do 8tage Type	Senate District: 08
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Steve Kagen	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Tun reality (Last, 1 list, moure many or 1 ayes	Date
Mailing Address	d M M M M M M M M M M M M M M M M M M M
	Amount
City State Zip Code	The interpolation of the property of the prope
	The authorities of the control of the extension of the artists of
Purpose of Expenditure Category/	Office Sought: House State:
Type	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:
	Check One: Support Oppose
Colondar Voor To Date Por Floriton	<del></del>
I Laienner Year-In-Liate Per Flection	Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
for Office Sought	
Calendar Tear-10-Date Per Election	Other (specify)
for Office Sought	Other (specify)
for Office Sought  Full Name (Last, First, Middle Initial) of Payee	Other (specify)  Date
for Office Sought  Full Name (Last, First, Middle Initial) of Payee	Other (specify)  Date
for Office Sought  Full Name (Last, First, Middle Initial) of Payee  Mailing Address	Other (specify)  Date  Amount
Full Name (Last, First, Middle Initial) of Payee  Mailing Address  City State Zip Code  Purpose of Expenditure Category/	Office Sought: House State:
Full Name (Last, First, Middle Initial) of Payee  Mailing Address  City State Zip Code  Purpose of Expenditure Category/ Type	Other (specify)  Date  Amount  Office Sought: House State:
Full Name (Last, First, Middle Initial) of Payee  Mailing Address  City State Zip Code  Purpose of Expenditure Category/	Other (specify)  Date  Amount  Office Sought: House State: Senate District:
Full Name (Last, First, Middle Initial) of Payee  Mailing Address  City. State Zip Code  Purpose of Expenditure Category/ Type	Office Sought: House State: Senate President
Full Name (Last, First, Middle Initial) of Payee  Mailing Address  City State Zip Code  Purpose of Expenditure Category/ Type  Name of Federal Candidate Supported or Opposed by Expenditure:	Other (specify)  Date  Amount  Office Sought: House State: Senate President  Check One: Support Oppose  Disbursement For: Primary General
Full Name (Last, First, Middle Initial) of Payee  Mailing Address  City State Zip Code  Purpose of Expenditure Category/ Type  Name of Federal Candidate Supported or Opposed by Expenditure:	Office Sought: House State: Senate President Check One: Support Oppose Disbursement For: Primary General Office Specify)
Full Name (Last, First, Middle Initial) of Payee  Mailing Address  City. State Zip Code  Purpose of Expenditure Category/ Type  Name of Federal Candidate Supported or Opposed by Expenditure:  Calendar Year-To-Date Per Election for Office Sought	Other (specify)  Date  Amount  Office Sought: House State: Senate District: President  Check One: Support Oppose  Disbursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee  Mailing Address  City. State Zip Code  Purpose of Expenditure Category/ Type  Name of Federal Candidate Supported or Opposed by Expenditure:  Calendar Year-To-Date Per Election for Office Sought	Other (specify)  Date  Amount  Office Sought: House State: Senate President  Check One: Support Oppose  Disbursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee  Mailing Address  City State Zip Code  Purpose of Expenditure Category/ Type  Name of Federal Candidate Supported or Opposed by Expenditure:  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures	Other (specify)  Date  Amount  Office Sought: House State: Senate District: President  Check One: Support Oppose  Disbursement For: Primary General  Other (specify)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confi	mation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busines	ss 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):	Receipt or Postmarked
PREPARER (2/2005)	عارع/ه۶ DATE PREPARED
(3/2005)	