

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Planned Parenthood Action Fund Inc. PAC, dba Planned Parenthood Federal PAC

ADDRESS (number and street)

123 William St, 10th Floor

Check if different  
than previously  
reported. (ACC)

New York

NY

10038

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00314617

3. IS THIS  
REPORTNEW  
(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  
Year-End 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 (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

[ ]

(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

[ ]

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hubbard, Tshombe, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Planned Parenthood Action Fund Inc. PAC, dba Planned Parenthood Federal PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
11 / 29 / 2016 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		<span style="border: 1px solid black; padding: 2px;">966054.73</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">383275.68</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">12918.78</span>	<span style="border: 1px solid black; padding: 2px;">410859.65</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">396194.46</span>	<span style="border: 1px solid black; padding: 2px;">1376914.38</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">-7022.22</span>	<span style="border: 1px solid black; padding: 2px;">973697.70</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">403216.68</span>	<span style="border: 1px solid black; padding: 2px;">403216.68</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ 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)

Page 3

Write or Type Committee Name

Planned Parenthood Action Fund Inc. PAC, dba Planned Parenthood Federal PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	9	/	2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	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		
(i) Itemized (use Schedule A).....	6500.00	181849.00
(ii) Unitemized .....	5941.00	224347.34
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12441.00	406196.34
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	12441.00	406196.34
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	477.78	4287.64
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	370.37
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	5.30
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(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)) .....	12918.78	410859.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	12918.78	410859.65

# **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
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	477.78	-10823.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	477.78	-10823.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-7500.00	927762.43
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other 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 (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	56758.55
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	-7022.22	973697.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-7022.22	973697.70

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	12441.00	406196.34
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12441.00	406196.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	477.78	-10823.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	477.78	4287.64
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	-15110.92

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 14

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Action Fund Inc. PAC, dba Planned Parenthood Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Chriest, Camille, , ,**

Mailing Address 13514 28th Avenue SE

City  
Bothell

State  
WA

Zip Code  
98012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 06 / 2016

**Transaction ID : A2016-2877008**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Cooper, David, , ,**

Mailing Address 2423 Bonnywood Lane

City  
Dallas

State  
TX

Zip Code  
75233

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 06 / 2016

**Transaction ID : A2016-2876955**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Owens, Elizabeth, , ,**

Mailing Address 3000 Galloway Ridge #B106

City  
Pittsboro

State  
NC

Zip Code  
27312-8659

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 28 / 2016

**Transaction ID : A2016-2876963**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2800.00

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 14  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Action Fund Inc. PAC, dba Planned Parenthood Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ragosta, Arthur, E, Mr.,**

Mailing Address 889 Circle Drive

City  
Santa Clara

State  
CA

Zip Code  
95050-5928

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2016

**Transaction ID : A2016-2876960**

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Richey, Paula, , Ms.,**

Mailing Address PO Box 425

City  
Amery

State  
WI

Zip Code  
54001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2016

**Transaction ID : A2016-2876959**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Richter, Mark, , ,**

Mailing Address 3116 Robinhood Ln

City  
South Bend

State  
IN

Zip Code  
46614-2114

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2016

**Transaction ID : A2016-2876964**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

1150.00

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

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 14

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Action Fund Inc. PAC, dba Planned Parenthood Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Schneider, Lawrence, , ,**

Mailing Address 305 W End Avenue #604

City  
New York

State  
NY

Zip Code  
10023-8157

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2016

**Transaction ID : A2016-2876961**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Streeter, Nicholas, , ,**

Mailing Address 191 Greenmanville Avenue

City  
Mystic

State  
CT

Zip Code  
06355

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 21 / 2016

**Transaction ID : A2016-2876958**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Weinberg, Philip, , Mr.,**

Mailing Address 1702 Drift Road Unit B

City  
Westport

State  
MA

Zip Code  
02790-1648

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 22 / 2016

**Transaction ID : A2016-2876962**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1050.00



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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 14

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Planned Parenthood Action Fund Inc. PAC, dba Planned Parenthood Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Williams, Susan, , ,**

Mailing Address 44 Concord Street

City  
West Hartford

State  
CT

Zip Code  
06119-1305

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 09 / 2016

**Transaction ID : A2016-2876957**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Workum, Peter, , ,**

Mailing Address 70 Fayerweather Street

City  
Cambridge

State  
MA

Zip Code  
02138-3355

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 05 / 2016

**Transaction ID : A2016-2876956**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1500.00

6500.00

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 14  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Action Fund Inc. PAC, dba Planned Parenthood Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Planned Parenthood Action Fund Inc.**

Mailing Address 123 William St, 10th Floor

City  
New York

State  
NY

Zip Code  
10038

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼  
Not Applicable

Aggregate Year-to-Date ▼

4232.69

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 09 / 2016

**Transaction ID : A2016-15413**

Amount of Each Receipt this Period

422.83

☐ Memo Item

Reimbursement of merchant fees

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Planned Parenthood Action Fund Inc.**

Mailing Address 123 William St, 10th Floor

City  
New York

State  
NY

Zip Code  
10038

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☒ Other (specify) ▼  
Not Applicable

Aggregate Year-to-Date ▼

4287.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 13 / 2016

**Transaction ID : A2016-15414**

Amount of Each Receipt this Period

54.95

☐ Memo Item

Reimbursement of merchant fees

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

477.78

477.78

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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, dba Planned Parenthood Federal PAC

Full Name (Last, First, Middle Initial)

**A. CitiBank F.S.B.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		0	5	6		2	0	1	6		

Mailing Address P.O. Box 19748

City  
WashingtonState  
DCZip Code  
20036Purpose of Disbursement  
Merchant fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

FEC Identification Number

C

Transaction ID : B640284

Amount of Each Disbursement this Period

54.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Mastercard/Visa**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		0	2	3		2	0	1	6		

Mailing Address PO Box 200

City  
WilsonState  
NCZip Code  
27894Purpose of Disbursement  
Merchant fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

State:

District:

FEC Identification Number

C

Transaction ID : B640285

Amount of Each Disbursement this Period

422.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

477.78

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

477.78

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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

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, dba Planned Parenthood Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Barbara Lee for Congress**

Mailing Address 505 14th St./Ste. 900

City  
OaklandState  
CAZip Code  
94612Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Lee, Barbara, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA

District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2016					

FEC Identification Number

**C** C00331769**Transaction ID : B601804**

Amount of Each Disbursement this Period

-1500.00

☐ Memo Item 06/29/16  
 Voided: Original check dated

Full Name (Last, First, Middle Initial)

**B. Robin Kelly for Congress**

Mailing Address PO Box 6953

City  
ChicagoState  
ILZip Code  
60680Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Kelly, Robin, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL

District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2016					

FEC Identification Number

**C** C00539866**Transaction ID : B601810**

Amount of Each Disbursement this Period

-2500.00

☐ Memo Item 06/21/16  
 Voided: Original check dated

Full Name (Last, First, Middle Initial)

**C. Titus for Congress**

Mailing Address P.O. Box 72454

City  
Las VegasState  
NVZip Code  
89170Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Titus, Dina, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV

District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2016					

FEC Identification Number

**C** C00499467**Transaction ID : B620780**

Amount of Each Disbursement this Period

-1000.00

☐ Memo Item  
 Voided, delivered, not cashed:  
 Original check dated 11/01/16
**SUBTOTAL** of Disbursements This Page (optional)..... ►

-5000.00

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

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SB23  
Transaction ID :

This amendment is being made to reflect checks were voided and not reported on the previous report

Form/Schedule:  
Transaction ID:

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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, dba Planned Parenthood Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Wyden for Senate**

Mailing Address 232 NE 9th Avenue

City  
PortlandState  
ORZip Code  
97232Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Wyden, Ron, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2016					

FEC Identification Number

**C** C00308676**Transaction ID : B585466**

Amount of Each Disbursement this Period

-2500.00

☐ Memo Item 12/03/15  
 Voted: Original check dated

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

-2500.00

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

-7500.00