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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

'	or other man An Aut	nonzea committee	Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	^e 12FE4M5
Protecting Choice in Ca	alifornia, a project of	Planned Parenthood	d Affiliates of California
ADDRESS (number and street)	555 Capitol Mall, Suite 400		
▼ Check if different			
than previously reported. (ACC)	Sacramento		CA 95814
2. FEC IDENTIFICATION NU	MBER ▼ CIT	ГУ 🛦	STATE ▲ ZIP CODE ▲
C C00556860		S THIS NEW (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20	(Mon-Election Year Only) M6) Sep 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:			(Non-Election Year Only)
April 15 Quarterly Report (Q	1)	20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q:	(C) 12-Day	Primary (12P) Convention (12C)	General (12G) Runoff (12R) Special (12S)
October 15 Quarterly Report (Q	·	Convention (120)	opedia (120)
January 31 Year-End Report (YI	E) Election	on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	x General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	on on 11 / 06	in the State of CA
5. Covering Period 10			11 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined thi		my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasurer	Ko, Alissa, , ,		
Signature of Treasurer Ko, Al	lissa, , ,	[Electronically Filed]	Date 12 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, errone	ous, or incomplete informatio	n may subject the person sign	ning this Report to the penalties of 52 U.S.C. § 3010
Office Use			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

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

10 18 2018 11 26 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 135874.74 January 1. 2018 (b) Cash on Hand at 82358.94 Beginning of Reporting Period..... 32440.00 43877.14 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 179751.88 114798.94 6(a) and 6(c) for Column B)..... 38539.20 103492.14 7. Total Disbursements (from Line 31)..... Cash on Hand at Close of 8. Reporting Period 76259.74 76259.74 (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 13648.84 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

10 2018 11 26 2018 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 500.00 4125.14 (i) Itemized (use Schedule A)..... 125.00 125.00 (ii) Unitemized (iii) TOTAL (add 4250.14 625.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 30000.00 37416.76 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 41666.90 30625.00 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 2210.24 (Dividends, Interest, etc.)..... 1815.00 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))......▶ 32440.00 43877.14 20. Total Federal Receipts 32440.00 43877.14 (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)		Calonida Toda to Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	26439.30	51727.45
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))	26439.30	51727.45
Committees	0.00	0.00
Federal Candidates/Committees 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))	4 4 4	
(use Schedule F)	0.00	0.00
. Loan Repayments Made	0.00	0.00
Loans MadeTo:	0.00	0.00
(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
. Other Disbursements (Including		
Non-Federal Donations)	12099.90	51764.69
 Federal Election Activity (52 U.S.C. § 3010⁻¹ (a) Allocated Federal Election Activity (from Schedule H6) 	1(20))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
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
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	38539.20	103492.14
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	38539.20	103492.14

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

		3
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)	30625.00	41666.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30625.00	41666.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	26439.30	51727.45
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	26439.30	51727.45

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the

F	OR	LINE	NU	MBER	:	PAGE	6	OF	15
(0	che	ck only	or	ne)					
	X	11a		11b		11c	12	2	
		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 AJE Partners Date of Receipt Mailing Address 1803 Sixth Street, Suite B 2018 06 City Zip Code State Transaction ID: INCA1056 CA Berkeley 94710 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 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) 500.00 SUBTOTAL of Receipts This Page (optional)..... 500.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	_	FOR LINE NUMBER:						7 (OF	15
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page		11a		11b	X	11c		12		
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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 Fund Her PAC Date of Receipt Mailing Address 555 Capitol Mall, Suite 400 2018 City Zip Code State Transaction ID: INCA1055 CA Sacramento 95814 Amount of Each Receipt this Period FEC ID number of contributing 10000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 10000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Women in Power PAC Date of Receipt Mailing Address 1787 Tribute Road, Suite K 2018 City State Zip Code Transaction ID: INCA1057 CA Sacramento 95815 Amount of Each Receipt this Period FEC ID number of contributing 20000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 20000.00 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) 30000.00 SUBTOTAL of Receipts This Page (optional)..... 30000.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

					MBER	:	PAGE	8	OF		15
Use separate schedule(s) for each category of the	(C	he	ck only	or	ne)			,			
Detailed Summary Page			11a		11b		11c	12			
,			13		14		15	16	5	×	17

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 Savvy Communications, LLC Date of Receipt Mailing Address 41750 Rancho Las Palmas Drive 2018 Suite E3 City State Zip Code Transaction ID: INCA1065 CA Rancho Mirage 92270 Amount of Each Receipt this Period FEC ID number of contributing 1815.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Refund Receipt For: Aggregate Year-to-Date ▼ Primary General 1815.00 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)

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UBTOTAL of Receipts This Page (optional)▶	1815.00	
OTAL This Period (last page this line number only)	1815.00	

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SCHEDULE B (FEC Form 3X)			FOR LINE	FOR LINE NUMBER: PAGE 9 OF			
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only				
		Summary Page	X 21b 28a	22 23 28c 28c	26 27 29 30b		
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NAME OF COMMITTEE (In Full)							
Protecting Choice in California, a p	roject of	Planned Pa	arenthood .	Affiliates of Califo	ornia		
Full Name (Last, First, Middle Initial)				5			
A. Digital Tractor Graphic Design				Date of Disbursemer	/ Y Y Y Y Y		
Mailing Address 3111 S Street, #204		1		11 01	2018		
City Sacramento	State CA	Zip Code 95816		FEC Identification Nu	ımber		
Purpose of Disbursement		93616					
Campaign Literature - Non Federal			004	C			
Candidate Name			Category/	Transaction ID :	EXPB1054 oursement this Period		
			Type	Amount of Each Disk	Jursement this renou		
Office Sought: House Disburser	nent For:			1	541.25		
Senate	Primary	General		,	,		
President	Other (spec	cify) 🔻		Memo Item			
State: District:							
Full Name (Last, First, Middle Initial) B. Planned Parenthood Affiliates of C	alifornia			Date of Disbursemer	t ·		
5. Planned Parenthood Anniales of C	alliomia			11 01 2018			
Mailing Address 555 Capitol Mall, Suite 510							
City	State	Zip Code		FEC Identification Nu	ımher		
Sacramento	CA	95814					
Purpose of Disbursement Travel Expenses - Non Federal	002			C			
Candidate Name				Transaction ID :			
			Category/ Type	Amount of Each Dist	oursement this Period		
Office Sought: House Disburser	nent For:	I		487.55			
Senate	Primary	General			7		
President	Other (spec	cify)		Memo Item			
State: District:							
Full Name (Last, First, Middle Initial) C. Planned Parenthood Votes				Date of Disbursemer			
Mailing Address 123 William Street, 10th Floor				11 15	2018		
City	State	Zip Code		FEC Identification Nu	ımher		
New York	NY	10038					
Purpose of Disbursement Online Voter Guide - Non Federal			004	Transaction ID :	EXPB1060		
Candidate Name			Category/	Amount of Each Disk	oursement this Period		
Office Sought: House Disburser	nent For:		Туре		350.00		
Senate	Primary	General		7	7-1-4-1		
President	Other (spec	cify) 🔻		Memo Item			
State: District:				I Wellio Itelli			
SUBTOTAL of Disbursements This Page (optional)					1378.80		
TOTAL This Period (last page this line number only)							

17

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 10 OF			
ITEMIZED DISBURSEMENTS		parate schedule(s) FOR LINE (check only	NOMBER:		
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	Detailed		28a	28b 28c 29 30b		
Any information copied from such Reports and Stat						
or for commercial purposes, other than using the na	ame and add	aress of any polit	ical committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)	project o	of Dlangad E	Paranthand	Affiliator of California		
Protecting Choice in California, a	project	n Flaillieu F	arentinoou i	Allillates of California		
Full Name (Last, First, Middle Initial)				B (B)		
A. Savvy Communications, LLC				Date of Disbursement		
Mailing Address 41750 Rancho Las Palmas Drive	<u> </u>			11 01 2018		
Suite E3						
City	State	Zip Code		FEC Identification Number		
Rancho Mirage Purpose of Disbursement	CA	92270				
Text Messages - Non Federal			004	C		
Candidate Name			Category/	Transaction ID: EXPB1053 Amount of Each Disbursement this Period		
			Type			
	sement For:			25060.50		
Senate President	Primary	General		_		
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Full Name (Last, First, Middle Initial)						
В.				Date of Disbursement		
				M = M / D = D / Y = Y = Y		
Mailing Address						
City	City State Zip Code					
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Purpose of Disbursement						
Candidate Name						
			Category/ Type			
Office Sought: House Disburs	sement For:		71			
Senate	Primary	General				
President	Other (sp	ecify)		Memo Item		
State: District:						
Full Name (Last, First, Middle Initial) C.				Date of Disbursement		
				M M / D D / Y Y Y Y		
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City	State	Zip Code		CCC Identification Number		
•				FEC Identification Number		
Purpose of Disbursement				C		
Candidate Name			0.41.11.1	Amount of Each Dishursoment this Derive		
			Category/ Type	Amount of Each Disbursement this Period		
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Senate	Primary	General				
President District:	Other (sp	ecify) 🔻		Memo Item		
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SUBTOTAL of Disbursements This Page (optional))			25060.50		
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TOTAL This Period (last page this line number on	lv)			26439.30		

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	NAME OF COMMITTEE (In Full)		· · ·			
$ \rangle$	Protecting Choice in California, a p	roject of	f Planned Pa	arenthood	Affiliates of C	alifornia
_	Full Name (Last, First, Middle Initial)					
Α.	API				Date of Disburs	ement
	Mailing Address 4471 Nicole Drive					19 2018
	City	State	Zip Code		FEC Identification	on Number
	Lanham	MD	20706			on Number
	Purpose of Disbursement In-kind: T-Shirts - Non Federal			011	C	
	Candidate Name			011		n ID : EXPB1043
	Candidate Name			Category/ Type	Amount of Each	Disbursement this Period
	Office Sought: House Disburser	nent For:		Type		2099.90
	Senate	Primary	General			45 45
	President	Other (spec	cify) ▼		Memo Item	
	State: District:				L Wichio Rein	
_	Full Name (Last, First, Middle Initial)					
В.	California Progressive PAC				Date of Disburs	ement
	Mailing Address 777 Court Figure Court				1	25 2018
	Mailing Address 777 South Figueroa Street Suite 4050				10	20 2010
		State	Zip Code		FEC Identification	on Number
	Los Angeles	CA	90017			on indilioei
	Purpose of Disbursement Contribution - Non Federal			044		
	Candidate Name			011		n ID : EXPB1052
	California Progressive PAC			Category/ Type	Amount of Each	Disbursement this Period
	Office Sought: House Disbursen	nent For:		iype		10000.00
	Senate	Primary	General			7 7
	President	Other (spec	cify)		Memo Item	
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_	Full Name (Last, First, Middle Initial)					
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	Candidate Name					
	Candidate Name			Category/	Amount of Each	Disbursement this Period
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	President	Other (spec			Memo Item	
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Г						
s	UBTOTAL of Disbursements This Page (optional)			·····•		12099.90
Г						12099.90
[T	OTAL This Period (last page this line number only)				1	12099.90

Excluding Loans

(Use separate schedule(s) for each

PAGE 12 OF FOR LINE NUMBER: (check only one)

15

9 numbered line) **X** 10 NAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood Affiliates of California A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Monetary donation to Planned LG Campaigns, LLC Parenthood Adv Project Los Angeles Co. Action Fund, ID #C00687491 Mailing Address 1510 J Street, Suite 210 State Zip Code Sacramento CA 95814 Transaction ID: PAYD1002 Outstanding Balance Beginning This Period 1333.34 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1333.34 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Monetary donation to Planned LG Campaigns, LLC Parenthood Action Fund of the Pacific Southwest PAC,ID #C00688432 Mailing Address 1510 J Street, Suite 210 City State Zip Code Sacramento 95814 CA Outstanding Balance Beginning This Period Transaction ID: PAYD994 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1116.66 1116.66 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Monetary donation to Planned LG Campaigns, LLC Parenthood of Orange San Bernardino Co Community AF PAC, C00687848 Mailing Address 1510 J Street, Suite 210 City State Zip Code CA 95814 Sacramento Outstanding Balance Beginning This Period Transaction ID: PAYD997 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 3000.00 3000.00 0.00 5450.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) 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) ▶

Excluding Loans

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

PAGE 13 OF **FOR** (check

LINE NUMBER:		
k only one)		9
	X	10

NAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood Affiliates of California A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Monetary donation to We Vote - Nosotros LG Campaigns, LLC Votamos - PPAMM Committee, ID #C00527226 Mailing Address 1510 J Street, Suite 210 State Zip Code Sacramento CA 95814 Transaction ID: PAYD1000 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 3000.00 3000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Monetary donation to Planned LG Campaigns, LLC Parenthood Adv Project Los Angeles Co. Action Fund, ID #C00687491 Mailing Address 1510 J Street, Suite 210 City State Zip Code Sacramento 95814 CA Outstanding Balance Beginning This Period Transaction ID: PAYD1003 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 3000.00 0.00 3000.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Staff Time & Website for Voter Guide; 5/19/16 Planned Parenthood Affiliates of California - 6/30/16 Mailing Address 555 Capitol Mall, Suite 510 City State Zip Code CA 95814 Sacramento Outstanding Balance Beginning This Period Transaction ID: PAYD769 1.20 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 1.20 0.00 6001.20 1) SUBTOTALS This Period This Page (optional)..... 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 line of Summary Page (last page only) ▶

Excluding Loans

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

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PAGE	14	OF	15
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NAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood Affiliates of California A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Staff Time & Website for Voter Guide: 5/19/16 Planned Parenthood Affiliates of California - 6/30/16 Mailing Address 555 Capitol Mall, Suite 510 State Zip Code Sacramento CA 95814 Transaction ID: PAYD770 Outstanding Balance Beginning This Period 32.66 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 32.66 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Website & Voter Guide Various Unitemized Planned Parenthood Affiliates of California Candidates Mailing Address 555 Capitol Mall, Suite 510 City State Zip Code Sacramento 95814 CA Outstanding Balance Beginning This Period Transaction ID: PAYD796 42.80 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 42.80 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Salary Planned Parenthood Affiliates of California Mailing Address 555 Capitol Mall, Suite 510 City State Zip Code CA 95814 Sacramento Outstanding Balance Beginning This Period Transaction ID: PAYD1044 138.70 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 138.70 214.16 1) SUBTOTALS This Period This Page (optional)..... 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 line of Summary Page (last page only) ▶

Excluding Loans

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

FOR LINE NUMBER:
(check only one) 9

x 10

	ME OF COMMITTEE (In Full) rotecting Choice in California, a proje	ect of Pla	nned Parenthood	Affiliates of California
	A. Full Name (Last, First, Middle Initial) of Debtor Planned Parenthood Affiliates of Mailing Address 555 Capitol Mall, Suite 510	Nature of Debt (Purpose): Salary		
	City Sacramento	State CA	Zip Code 95814	
	Outstanding Balance Beginning This Period 0.00			Transaction ID : PAYD1064
	Amount Incurred This Period Payment This Period		Outstanding Balance at Close of This Period	
	970.39 0.00		970.39	
	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planned Parenthood Affiliates of California			Nature of Debt (Purpose): Salary
L	Mailing Address 555 Capitol Mall, Suite 510			
	City Sacramento	State CA	Zip Code 95814	
	Outstanding Balance Beginning This Period 0.00			Transaction ID : PAYD1063
	Amount Incurred This Period	Payment This Period		Outstanding Balance at Close of This Period
	1013.09	0.00		1013.09
	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
	Mailing Address			
	City	State	Zip Code	
	Outstanding Balance Beginning This Period			
	Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
1)	SUBTOTALS This Period This Page (optional)			1983.48
2)	TOTALS This Period (last page this line number only)			13648.84
3)	TOTAL OUTSTANDING LOANS from Schedule C	0.00		
4)	4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶			