FEC FORM 3X

04/11/2016 16 : 13

PAGE 1 / 42

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

									Office U	se Only	
1.	NAME C	DF ITEE (in full)	TYPE OR	PRINT V		mple: If typi r the lines.	ng, type	12FE	4M5		
, P	lanned	Parenthood '	Votes								1
	DRESS (n	number and street)	123 Wil	iam St, 10th Fl	oor						
-	Che	eck if different									
		n previously orted. (ACC)	New Yo	ork				NY	10038	8	
2.	FEC ID	ENTIFICATION N			CITY 🔺		ę	STATE 🔺	<u> </u>	ZIP COI	DE 🔺
	C	C00489799		:	3. IS THIS REPORT		NEW (N) OR	×	AMENDED (A)		
4.	TYPE (Choose	OF REPORT One)		port	Feb 20 (M2)		May 20 (M5)		Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Qua	arterly Reports:	Du	e On: X	Mar 20 (M3)		Jun 20 (M6)		Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
		April 15			Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)		Jan 31 (YE)
		April 15 Quarterly Report (Q1) (c)	12-Day		Primary (12F	>)	Ger	neral (12G)		Runoff (12R)
		July 15 Quarterly Report (Q2)	PRE-Election							
		October 15 Quarterly Report (Report for the	ne:	Convention	(120)	Spe	ecial (12S)		
		January 31 Year-End Report (E	lection on	M M /	D D /	YYY	Y Y	in the State of	
		July 31 Mid-Year Report (Non-electi Year Only) (MY)	on (d)	30-Day POST-Electi		General (300	G)	Rur	noff (30R)		Special (30S)
		Termination Repor	t	Report for the	ne:	M M /		YYY	YYY	in the	
		(TER)		E	lection on				-	State of	
5.	Covering		02 / D		016	through	02 02	/ D 29	D / Y Y 20	Y Y 16	
l ce	rtify that	I have examined t	his Report	and to the be	st of my know	wledge and	belief it is tru	ie, corre	ct and comple	te.	
Тур	e or Print	Name of Treasur	er Liz Gus	tafson							
Sigi	nature of	Treasurer Liz	Gustafson			[Electronical]	ly Filed]	ate	M M / D 04 11	D /	2016
NO	E: Submi	ission of false, erro	neous, or in	complete inforr	mation may su	bject the per	son signing th	nis Repor	t to the penalti	es of 2 L	l.S.C. §437g.
-	U	fice se								FOR	
	Or	nly									

6.

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Planned Parenthood Votes Y М M 02 01 2016 02 29 2016 Report Covering the Period: From: To: COLUMN A COLUMN B This Period **Calendar Year-to-Date** (a) Cash on Hand Y 1143446.70 January 1, 2016 (b) Cash on Hand at

1582952.70 Beginning of Reporting Period..... 2738940.93 3277526.11 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 4420972.81 4321893.63 6(a) and 6(c) for Column B)..... 979083.87 1078163.05 7. Total Disbursements (from Line 31)..... 8. Cash on Hand at Close of Reporting Period 3342809.76 3342809.76 (subtract Line 7 from Line 6(d)) Debts and Obligations Owed TO 9. the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 220838.65 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

X

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Planned Parenthood Votes

Report Covering the Period: From: 02	7 01 7 Y Y Y Y Y 01 2016 To	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	2738940.93	3277526.11
(i) Itemized (use Schedule A)		3277320.11
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	2738940.93	3277526.11
(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		0077500.44
Totals to Line 33, page 5)▶	2738940.93	3277526.11
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	0.00
3. All Loans Received	0.00	
1		0.00
4. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	
(Carry Totals to Line 37, page 5)	0.00	0.00
5. Refunds of Contributions Made		
to Federal Candidates and Other	0.00	0.00
Political Committees 7. Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	0.00	
(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
 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 	2738940.93	3277526.11
, -, -, -, -, -, -, -, -, -, -, -, -, -,		
. Total Federal Receipts		

(subtract Line 18(c) from Line 19)

2738940.93

Page 3

I

DETAILED SUMMARY PAGE

	II. Disbursements	COLUMN A	COLUMN B
1 (Operating Expenditures:	Total This Period	Calendar Year-to-Date
	(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	00000.04	
((c) Total Operating Expenditures	82632.61	86223.7
((add 21(a)(i), (a)(ii), and (b))	82632.61	86223.7
٦	Transfers to Affiliated/Other Party		
(Committees Contributions to	0.00	0.00
F	Federal Candidates/Committees and Other Political Committees	0.00	0.00
(Independent Expenditures (use Schedule E)	889003.04	984491.04
(Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
		0.00	
L	Loan Repayments Made	0.00	0.00
	Loans Made Refunds of Contributions To:	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	200	
	(add Lines 28(a), (b), and (c))►	0.00	0.00
(Other Disbursements	7448.22	7448.22
F	Federal Election Activity (2 U.S.C. §431(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		
1	With Federal Funds(c) Total Federal Election Activity (add	0.00	0.00
((c) Iotal Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))►	0.00	0.00
٦	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c)).	979083.87	1078163.0
٦	Total Federal Disbursements		
((subtract Line 21(a)(ii) and Line 30(a)(ii)		
f	from Line 31)	979083.87	1078163.05

L

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	2738940.93	3277526.11
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2738940.93	3277526.11
add Line 21(a)(i) and Line 21(b))	82632.61	86223.79
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	82632.61	86223.79

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

42

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	I I I I I I I I I I I I I I I I I I I	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Planned Parenthood Votes		
Full Name (Last, First, Middle Initial) A. Mr. Jonathan Allan Soros		Date of Receipt
Mailing Address 70A Greenwich Ave PMB		02 22 2016
City New York	StateZip CodeNY10011-8300	Transaction ID : A2016-427740 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000000.00
Name of Employer	Occupation	Memo Item
JS Capital Management, LLC	CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000000.00	
Full Name (Last, First, Middle Initial) 3. Serena S Connelly		Date of Receipt
Mailing Address 3156 Brookhollow Drive		02 24 _2016 _
City	State Zip Code	Transaction ID : A2016-427741
Dallas	TX 75234	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100000.00
Name of Employer	Occupation	Memo Item
Contran Corp.	Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 77 Westcliff Road		M M / D D / Y Y Y Y 02 09 2016
City Weston	StateZip CodeMA02493	Transaction ID : A2016-427742 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400000.00
Name of Employer	Occupation	Memo Item
None	Retired	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400000.00	
SUBTOTAL of Receipts This Page (optiona	I) Þ	1500000.00

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

7 7 7 7

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`=H9A=N5 H=CB

Form/Schedule: SA11AI Transaction ID :

Please note that our committee follows all federal regulations, including those found at 11 CFR 104.7(a) governing the solicitation of contributors. This committee specifically requests all pertinent information from contributors, including employer and occupation; informs contributors that the committee is required by law to report the same; and, makes a follow-up request for omitted information when necessary. The committee thus complies with the best efforts rules.

Form/Schedule: SA11AI Transaction ID:

This report is being amended to correct the amount of a receipt (transaction A2016-447203) and its corresponding disbursement (transaction B597056), to update the previously estimated amounts of Independent Expenditures (transactions B595414, B595415, and B595416) as well as the corresponding entry on Schedule D, and to include additional Independent Expenditures (transactions B598485 - B598490) and a corresponding entry on Schedule D. Year-to-date totals are also updated. Please update your records accordingly.

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 42 (check only one) (check only one) 11c 12 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Planned Parenthood Votes			
<u> </u>	Full Name (Last, First, Middle Initial) John Henry			Date of Receipt
	Mailing Address 54 Riverside Drive #16-B			02 02 2016
	City New York	State NY	Zip Code 10024	Transaction ID : A2016-427743 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		10000.00
	Name of Employer Self - Employed	Occupation Writer		Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 10000.00]
	Full Name (Last, First, Middle Initial) David Karp			Date of Receipt
	Mailing Address 35 East 21st Street, #10E			02 25 2016
	City New York	State NY	Zip Code 10010	Transaction ID : A2016-427744 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100000.00
	Name of Employer Tumblr	Occupation Executive	1	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 100000.00]
<u> </u>	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address PO Box 149			02 24 2016
	City Dobbs Ferry	State NY	Zip Code 10522	Transaction ID : A2016-427745 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50000.00
	Name of Employer	Occupation Retired	I	— Memo Item
	None Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 50000.00	1
s	JBTOTAL of Receipts This Page (optional)			160000.00

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

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 OF 42 (check only one) I1a 11b 11c 12 I1a 11b 11c 12 I3 14 15 16 17
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Planned Parenthood Votes			
Α.	Full Name (Last, First, Middle Initial) Ms. Susan P Orr			Date of Receipt
	Mailing Address 669 Mirada Avenue		7.0.1	02 17 Y Y Y Y 2016
	City Stanford	State CA	Zip Code 94305	Transaction ID : A2016-427746 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer Telosa Software Inc.	Occupation Manageme		— Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 100000.00]
В.	Full Name (Last, First, Middle Initial) Ms. Julie Packard Mailing Address 6551 Glen Haven Road			Date of Receipt
	City Soquel	State CA	Zip Code 95073-9779	02 17 2016 Transaction ID : A2016-427747 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100000.00
	Name of Employer Monterey Bay Aquarium	Occupation Director	I	— Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 100000.00	
с.	Full Name (Last, First, Middle Initial) Gaye T Pigott			Date of Receipt
	Mailing Address 1405 42nd Avenue E			02 03 Y Y Y Y Y 2016
	City Seattle	State WA	Zip Code 98112	Transaction ID : A2016-427748 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250000.00
	Name of Employer	Occupation		Memo Item
	None Receipt For: Primary General Other (specify) ▼	Homemake Aggregate	Year-to-Date ▼ 250000.00]
s	UBTOTAL of Receipts This Page (optional)			450000.00

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 42 (check only one) I1a 11b 11c 12 I1a 11b 11c 12 I3 14 15 16 17
Any information copied from such Reports and Stat or for commercial purposes, other than using the n		
NAME OF COMMITTEE (In Full) Planned Parenthood Votes		
Full Name (Last, First, Middle Initial) A. Jay Robert Pritzker Mailing Address 111 S Wacker Drive #4000		Date of Receipt
City	State Zip Code	02 24 2016 Transaction ID : A2016-427749
Chicago FEC ID number of contributing federal political committee.	IL 60606	Amount of Each Receipt this Period
Pritzker Group	Occupation Managing Partner Aggregate Year-to-Date ▼ 500000.00	– Memo Item
B. Jon L Stryker Mailing Address 44 W 28th Street		Date of Receipt
City New York	StateZip CodeNY10001	02 16 2016 Transaction ID : A2016-427750 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	100000.00
Poppint For:	Architect Aggregate Year-to-Date ▼ 100000.00	-
Full Name (Last, First, Middle Initial) C. Planned Parenthood Action Fund		Date of Receipt
Mailing Address 123 William St, 10th Floor		02 29 2016
City New York	StateZip CodeNY10038	Transaction ID : A2016-435319 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	6321.12
Planned Parenthood Action Fund	Occupation N/A Aggregate Year-to-Date ▼ 16882.35	In-kind contribution: staff time for accounting and F
SUBTOTAL of Receipts This Page (optional)	•	606321.12

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	BX)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 42 (check only one) Image: Compare the second secon
		ay not be sold or used by any p	13 14 15 16 17 person for the purpose of soliciting contributions re to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Planned Parenthood Action Fund Mailing Address 123 William St, 10th Flow City New York FEC ID number of contributing federal political committee. Name of Employer Planned Parenthood Action Fund Receipt For: Primary General Other (specify) ▼	or State NY C Occupation N/A	Zip Code 10038 Year-to-Date ▼ 16882.35	Date of Receipt this Period Da
Full Name (Last, First, Middle Initial) B. Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State C Occupation Aggregate	Zip Code	Date of Receipt
Full Name (Last, First, Middle Initial) C. Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State C Occupation Aggregate	Zip Code	Date of Receipt
SUBTOTAL of Receipts This Page (option	al)		22619.81

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

7

 2738940.93

	CHEDULE B (FEC Form 3X)	Use separate schedule(s)		-		INE NUMBER: PAGE 12 OF									
IT	EMIZED DISBURSEMENTS	for each category of the				only one) 21b 22 23 24 25									
_		Detailed Summary Page			27	28a		28b		28c		29	30b		
	ny information copied from such Reports and Stat for commercial purposes, other than using the n														
\backslash	NAME OF COMMITTEE (In Full)														
	Planned Parenthood Votes														
^	Full Name (Last, First, Middle Initial)					Date	of Di	isburse	amo	nt					
	Hart Research Associates					M				/ .		Y	Y		
	Mailing Address 1724 Connecticut Avenue NW					02			26			016			
	City	State Zip Code DC 20009				Trar	sact	tion ID): B	59686	51				
	Washington Purpose of Disbursement	DC 20009	_	_	_	-									
	Polling research		(001		Amount of Each Disbursement this Period 53685.68 Memo Item									
	Candidate Name		Cat T	ego ype											
	Office Sought: House Disburs	ement For: 2016 Primary General													
	President	Cother (specify) ▼													
	State: District:	Not Applicab	le												
_	Full Name (Last, First, Middle Initial)														
в.	Planned Parenthood Action Func	l Inc.						isburse		nt					
	Mailing Address 123 William St, 10th Floor					02		2	29	/ Y		016	Y		
	City New York	StateZip CodeNY10038				Trai	isaci	tion ID) : B	59700)9				
	Purpose of Disbursement In-kind contribution: staff time for accounting and	FEC compliance		001		Δπου	nt of	Each	Die	hureo	mont	thic	Period		
	Candidate Name				n/	Amount of Each Disbursement this Period									
			Cat T	ype		6321.12									
		ement For: 2016													
	President	<pre> Primary General</pre>													
	State: District:	Not Applicab	le												
_	Full Name (Last, First, Middle Initial)						()								
C.	Planned Parenthood Action Fund	Inc.						isburse		nt					
	Mailing Address 123 William St, 10th Floor					02			29	/ Y		016	Ŷ		
	City New York	State Zip Code NY 10038				Trai	isaci	tion ID) : B	59705	56				
	Purpose of Disbursement				-	-									
	In-kind contribution: staff time for strategic federal program work					Amou	nt of	Each	Dis	bursei	ment	this	Period		
	Candidate Name		Cat T	ego ype							2	2619.	81		
	Office Sought: House Disburs	ement For: 2016		700			emo	ltem		- 7					
	Senate	Primary General													
	State: District:	Other (specify) ▼ Not Applicab	ام												
							_	-	_	_	_	-			
s	SUBTOTAL of Disbursements This Page (optional)			• •	Ļ	-	7		- 7	8	2626.	61		
т	OTAL This Period (last page this line number on	ly)						- 7		7					

for each category of the Detailed Summary Page Ints may not be sold or used and address of any politica	d by any	21b 27 perso	22 28a n for the		e of s			25 29 ntribu	26 30b
and address of any politica								ntribu	liana
						om suc	ch co		
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			Date of 02	f Disbur	seme) 16	Ŷ
te Zip Code Y 10038			Trans	action	ID : E	359705	4		
	001	٦	Amoun	t of Eac	h Di	sburser	nent	this I	Period
	Category Type	/		. ,		- 7	ę	5372.4	46
rimary General ther (specify) ▼			See cor	respond		Iraw do	wn tr	ansa	ction, ID
Not Applicable			M M	_	D	ent / Y			Y
te Zip Code				action		359705			_
1 10038	001		Amoun	t of Ead	h Di	sburser	nent	this I	Period
I	Category Type	/		. ,		. ,	-{	5372.4	46
nt For: 2016 imary General ther (specify) ▼			Draw de	own on a					
Not Applicable									
			Date of			_	Y	Y	Y
ate Zin Code								_	
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		1/	Amoun					this I	Period
nt For: rimary General ther (specify) ▼			Me						
	Y 10038 nt For: 2016 imary General ther (specify) ▼ Not Applicable te Zip Code Y 10038 nt For: 2016 imary General ther (specify) ▼ Not Applicable te Zip Code te Zip Code	Y 10038 001 Category Type nt For: 2016 imary General ther (specify) ▼ Not Applicable te Zip Code Y 10038 001 Category Type nt For: 2016 imary General ther (specify) ▼ Not Applicable te Zip Code Category Type Not Applicable	Y 10038 001 Category/ Type nt For: 2016 imary General ther (specify) ▼ Not Applicable te Zip Code Y 10038 001 Category/ Type nt For: 2016 imary General ther (specify) ▼ Not Applicable te Zip Code Y 10038	te Zip Code Y 10038 001 Category/ Type nt For: 2016 imary General ther (specify) ▼ Not Applicable Date of Category/ Type 10038 001 Category/ Type Not Applicable 001 Category/ Type nt For: 2016 imary General ther (specify) ▼ Not Applicable Date of Category/ Type Date of Men Draw da 21b of t Men Date of Men Date of Date of Men Date of Date of	te Zip Code Y 10038 001 Category/ Type nt For: 2016 imary General ther (specify) ▼ Not Applicable Category/ Type Not Applicable Date of Disbur 001 Category/ 02 Transaction Memo Item See correspond #B597055 Date of Disbur 02 Transaction Amount of Eac 02 Transaction Amount of Eac 02 Category/ Type nt For: 2016 imary General ther (specify) ▼ Not Applicable Date of Disbur Category/ Type Tans down on 21b of the 2014 Amount of Eac Category/ Type Amount of Eac Category/ Type te Zip Code Category/ Type te Zip Code Category/ Type Amount of Eac Category/ Type Memo Item Memo Item	te Zip Code Y 10038 001 Category/ Type nt For: 2016 imary General ther (specify) ▼ Not Applicable Transaction ID : E Amount of Each Dia See corresponding of #B597055 Date of Disburseme 02 / 29 Transaction ID : E Memo Item Date of Disburseme 02 / 29 Transaction ID : E Amount of Each Dia Category/ Type nt For: 2016 imary General ther (specify) ▼ Not Applicable Date of Disburseme Memo Item Date of Disburseme Memo Item Date of Disburseme Memo Item Date of Disburseme Memo Item Memo Item	te Zip Code Y 10038 001 Category/ Type nt For: 2016 imary General ther (specify) ▼ Not Applicable 229 / 29 10038 001 Category/ Type te Zip Code Y 10038 001 Category/ Type te Zip Code Y 10038 001 Category/ Type te Zip Code Y 10038 001 Category/ Type te Zip Code Y 10038 001 Category/ Type te Zip Code Y 10038 001 Category/ Type Date of Disbursement Memo Item Draw down on advance to / 21b of the 2014 FEC Post-0 21b of the 2014 FEC Post-0 Transaction ID : B59705 Amount of Each Disburser Date of Disbursement Memo Item Draw down on advance to / 21b of the 2014 FEC Post-0 Amount of Each Disburser Memo Item Date of Disbursement Memo Item Draw down on advance to / 21b of the 2014 FEC Post-0 Memo Item Date of Disburser Memo Item Date of Disburser Memo Item Date of Disburser Memo Item Memo Item Memo Item	te Zip Code Y 10038 001 Category/ Type nt For: 2016 imary General ther (specify) ▼ Not Applicable Category/ Type Not Applicable 001 Category/ Type nt For: 2016 imary General te Zip Code Y 10038 001 Category/ Type Not Applicable 001 Category/ Type Not Applicable 001 Category/ Type Not Applicable 001 Category/ Type Not Applicable 001 Category/ Type Not Applicable 001 Category/ Type Not Applicable 001 Category/ Type Not Applicable 001 Category/ Type Not Applicable 01 Category/ Type Not Applicable 02 Category/ Type Not Applicable 04 Category/ Type Not Applicable 05 Category/ Type Not Applicable 04 Category/ Type Not Applicable 05 Category/ Type Not Applicable	te Zip Code Y 10038 001 Category/ Type nt For: 2016 imary General ther (specify) ▼ Not Applicable Category/ Type Not Applicable 001 Category/ Type nt For: 2016 te Zip Code Y 10038 001 Category/ Type nt For: 2016 Category/ Type Not Applicable Date of Disbursement Category/ Type Not Applicable Date of Disbursement this F Category/ Type Not Applicable Date of Disbursement this F Category/ Type Not Applicable Date of Disbursement this F Category/ Type Not Applicable Date of Disbursement Category/ Type Not Applicable Date of Disbursement Memo Item Draw down on advance to Action Fun 21b of the 2014 FEC Post-General R Memo Item Memo Item Memo Item Memo Item Memo Item

SC	SCHEDULE B (FEC Form 3X)				LINE N	UMBER:				PA	GE	14 (DF	42
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(cł	necł	k only 21b	only one)						25		26
		Detailed Summary Page		\vdash	210	28a	-	23 28b		24 28c	X			26 30b
An or	y information copied from such Reports and Statem for commercial purposes, other than using the nam	nents may not be sold or use ne and address of any politica	d by I com	any nmit	perso tee to	n for the solicit co	purı ntrib	pose o outions	of so from	licitin n suc	ig co	ntribu	tions tee.	;
\backslash	NAME OF COMMITTEE (In Full)													
	Planned Parenthood Votes Full Name (Last, First, Middle Initial)													
-	Planned Parenthood Votes South A	Atlantic				Date o	f Dis							
	Mailing Address 100 S Boylan Ave					02	/	2	2)16	Y	
	Raleigh	StateZip CodeNC27603				Trans	acti	ion ID	: B5	9685	51			
	Purpose of Disbursement Local telephone recruitment		0	11		Amoun	t of	Each	Dist	ourse	ment	this	Perio	bd
	Candidate Name		Cate Ty	egor /pe	ry/			, ,		,		7448.	22	
	Senate	nent For: 2016 Primary General Other (specify) v				Me	mo l'	tem						
	State: District:	Not Applicable												
в.	Full Name (Last, First, Middle Initial)					Date o	f Dis	sburse	mer	t				
	Mailing Address					M = M	/	D	D	/ _Y	Y	Y	Y	
	City S	State Zip Code												
	Purpose of Disbursement		-			Amoun	t of	Each	Dist	ourse	ment	this	Perio	bd
	Candidate Name		Cate Ty	egor /pe	ry/			, ,		,				
		nent For: Primary General Other (specify) ▼		-		Mei	no li	tem						
	State: District:													
C.	Full Name (Last, First, Middle Initial)					Date o	f Dis							
	Mailing Address					M = M	ĺ	D	D	/	Y	Y	Y	
	City S	State Zip Code												
	Purpose of Disbursement					Amoun	t of	Fach	Dick		mant	thic	Perio	d
	Candidate Name	I	Cate Ty	egor /pe	ry/	Amoun		Lacii			Inent	uns	reno	
		nent For: Primary General Other (specify) ▼				Me	no li	/						
s	UBTOTAL of Disbursements This Page (optional)				•					-		7448.	22	٦
\vdash	OTAL This Period (last page this line number only).					Γ.		,		7		7448.	22	

SCHEDULE D (FEC Form 3X)		(Use separate	PAGE 15 OF 42
DEBTS AND OBLIGATIONS		schedule(s)	FOR LINE NUMBER:
Excluding Loans		for each numbered line)	(check only one) 9 X 10
NAME OF COMMITTEE (In Full)			
Planned Parenthood Votes			
A. Full Name (Last, First, Middle Initial) of Debt	or or Creditor	Nature of D	Debt (Purpose):
MackCrounse Group		Canvass lit	
Mailing Address 2001 N. Beauregard St. Ste 420	0		
	7.0.1		
City State Alexandria	Zip Code VA 22311		
	VA 22311		
Outstanding Balance Beginning This Period		Transacti	ion ID : D439020
3950.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0	.00	3950.00
(j)	7 7		7 7 7
B. Full Name (Last, First, Middle Initial) of Debto	or or Creditor	Nature of D	Debt (Purpose):
76 Words			of online adverstisements. See
		Schedule E	=
Mailing Address 1806 Vernon St, NW #100			
City State	Zin Code		
City State Washington	Zip Code DC 20009		
	DC 20003		
Outstanding Balance Beginning This Period		Transact	tion ID : D439021
9274.34			
Amount Incurred This Period	Payment This Period	Qutatandi	ng Balance at Close of This Period
Amount incurred finis renod	T ayment This T enou	Outstandi	ng balance at close of this renou
34985.00	4000	.00	40259.34
			· · · ·
C. Full Name (Last, First, Middle Initial) of Debt	tor or Creditor		Debt (Purpose):
Stones' Phones		Persuasion	n phone calls. See Schedule E
Mailing Address 41-750 Rancho Las Palmas Dr			
Mailing Address 41-750 Rancho Las Palmas Dr	#E-3		
City	State Zip Code		
Rancho Mirage	CA 92270		
Outstanding Balance Beginning This Period		Transact	tion ID : D439022
Outstanding balance beginning this renou		Tansac	1011 ID . D433022
22769.77			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
147218.48	3983	.38	166004.87
			210214.21
1) SUBTOTALS This Period This Page (optional)		····· ▶	7 7 7
2) TOTALS This Davied (last page this line number	r ophi)		
2) TOTALS This Period (last page this line numbe	я Ону <i>)</i>		7 7
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only)		
			7 7 7 7
4) ADD 2) and 3) and carry forward to appropriate	e line of Summary Page (last page c	only) ►	

60	HEDULE D (FEC Form 3X)		г		PAGE 16 OF 42
				(Use separate	
DE	BTS AND OBLIGATIONS			schedule(s)	FOR LINE NUMBER:
Exc	luding Loans			for each numbered line)	(check only one) 9 X 10
	ME OF COMMITTEE (In Full)				
	anned Parenthood Votes				
	A. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of D	ebt (Purpose):
					ertising. See Schedule E
	Blueprint Interactive				
	Mailing Address 2229 North Pollard St				
ŀ	City State	Zip Code			
	Arlington	VA	22207		
	Outstanding Delence Deginning This Deviad			Transacti	on ID : D439023
	Outstanding Balance Beginning This Period			Tunbuoti	
	0.00				
	Amount Incurred This Period	Paymer	nt This Period	Outstandi	ng Balance at Close of This Period
		i dyinci		Outstandi	
	10500.00		0.0	0	10500.00
	, , ,	,	, , , , , , , , , , , , , , , , , , , ,		, , ,
[B. Full Name (Last, First, Middle Initial) of Debtor	r or Creditor			ebt (Purpose):
	Itzamna Translations Company			Translation	fee. See Schedule E
	Mailing Address P.O. Box 1015				
-		Zin Oada			
	City State Glendale	Zip Code AZ	85311		
ŀ		Α <u>Σ</u>			
	Outstanding Balance Beginning This Period			Transact	ion ID : D439024
	Outstanding Balance Beginning This Period			Transact	ion ID : D439024
-	Outstanding Balance Beginning This Period 0.00				
	Outstanding Balance Beginning This Period		nt This Period		ion ID : D439024 ng Balance at Close of This Period
	Outstanding Balance Beginning This Period 0.00		nt This Period	Outstandir	
-	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period			Outstandir	ng Balance at Close of This Period
-	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period	Paymer		Outstandir	ng Balance at Close of This Period
-	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44	Paymer		Outstandir	ng Balance at Close of This Period 124.44
-	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44	Paymer		Outstandir	ng Balance at Close of This Period 124.44
	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44	Paymer		Outstandir	ng Balance at Close of This Period 124.44
-	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address	Paymer	0.0	Outstandir	ng Balance at Close of This Period 124.44
-	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto	Paymer		Outstandir	ng Balance at Close of This Period 124.44
-	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address	Paymer	0.0	Outstandir	ng Balance at Close of This Period 124.44
-	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address	Paymer	0.0	Outstandir	ng Balance at Close of This Period 124.44
-	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address City	Paymer	0.0	Outstandir	ng Balance at Close of This Period 124.44
-	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address City	Paymer	0.0	Outstandir	ng Balance at Close of This Period 124.44
-	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address City	Paymer	0.0	Outstandin	ng Balance at Close of This Period 124.44
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-	Outstanding Balance Beginning This Period Outstanding Balance Beginning This Period Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address City Outstanding Balance Beginning This Period	Paymer	0.0 Zip Code	Outstandin	ng Balance at Close of This Period 124.44 ebt (Purpose):
-	Outstanding Balance Beginning This Period Outstanding Balance Beginning This Period Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address City Outstanding Balance Beginning This Period	Paymer	0.0 Zip Code	Outstandin	ng Balance at Close of This Period 124.44 ebt (Purpose):
	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period	Paymer	0.0 Zip Code	Outstandin	ng Balance at Close of This Period 124,44 ebt (Purpose):
	Outstanding Balance Beginning This Period Outstanding Balance Beginning This Period Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address City Outstanding Balance Beginning This Period	Paymer	0.0 Zip Code	Outstandin	ng Balance at Close of This Period 124.44 ebt (Purpose):
1)	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period Amount Incurred This Period SUBTOTALS This Period This Page (optional)	Paymer	2ip Code	Outstandin	ng Balance at Close of This Period 124,44 ebt (Purpose):
1)	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period	Paymer	2ip Code	Outstandin	ng Balance at Close of This Period 124.44 ebt (Purpose):
1)	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period SUBTOTALS This Period This Page (optional) TOTALS This Period (last page this line number	Paymer or or Creditor State 2 Paymer 2 You only) 2	2ip Code	Outstandin	ng Balance at Close of This Period 124.44 ebt (Purpose):
1)	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period Amount Incurred This Period SUBTOTALS This Period This Page (optional)	Paymer or or Creditor State 2 Paymer 2 You only) 2	2ip Code	Outstandin	ng Balance at Close of This Period 124.44 ebt (Purpose): ng Balance at Close of This Period 10624.44 220838.65
1) 2) 3)	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 124.44 C. Full Name (Last, First, Middle Initial) of Debto Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period SUBTOTALS This Period This Page (optional) TOTALS This Period (last page this line number	Paymer or or Creditor State 2 Paymer Paymer C (last page only).	0.0 Zip Code	Outstandin	ng Balance at Close of This Period 124.44 ebt (Purpose): ng Balance at Close of This Period 10624.44 220838.65

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDIT	URES			PAGE 17 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC	DENTIFICATION NUMBER ▼
Planned Parenthood Votes			С	C00489799
Check if 24-hour report 48-hour rep	port New rep	ort Amends repo	ort filed on	
Full Name of Payee Hart Research Associates		Memo I	M M	blic Distribution/Dissemination
Mailing Address 1724 Connecticut Avenue	NW		Amount	03 2016
City	State	Zip Code		42.86
Washington	DC	20009		ID : B594860 sbursement or Obligation
Purpose of Expenditure Persuasion calls		Category/ Type 004	M 02	/ D D / Y Y Y Y 26 / 2016
Name of Federal Candidate		Support	Office Sought:	House District:
Hillary Clinton		Oppose	X President	Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought		1168609.16	Disbursement For 2016 Other	:: X Primary General (specify) ► Democratic Primary
Full Name of Payee Hart Research Associates		🗌 Memo Ite	Date of Pu	ublic Distribution/Dissemination
Mailing Address 1724 Connecticut Avenue	NW		Amount	
City	State	Zip Code		42.86
Washington	DC	20009		ID : B594861 sbursement or Obligation
Purpose of Expenditure Persuasion calls		Category/ Type 004	02	/ ^D 26 ^D / ^Y 2016
Name of Federal Candidate		Support	Office Sought:	House District:
Ted Cruz		X Oppose	President	Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought		24601.92	Disbursement For 2016 Other	r: X Primary General (specify) Republican Primary
(a) SUBTOTAL of Itemized Independent Ex	penditures			85.72
(b) SUBTOTAL of Unitemized Independent	Expenditures		••	<u>т</u>
(c) TOTAL Independent Expenditures			·· •	· · · · · · · · · · · · · · · · · · ·
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
Deirdre Schifeling	[Electron	ically Filed] Date	e 04 / D	
Signature				

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENI	DITURES			PAGE 18 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER V
Planned Parenthood Votes			C	C00489799
Check if 24-hour report 48-hour	report New rep	ort Amends repo	ort filed on	M / D = D / Y = Y = Y = Y
Full Name of Payee Hart Research Associates		🗌 Memo li	M	
Mailing Address 1724 Connecticut Aver	nue NW		02 Amount	03 2016
City	State	Zip Code		42.86
Washington	DC	20009		on ID : B594862 Disbursement or Obligation
Purpose of Expenditure Persuasion calls		Category/ Type 004	02	
Name of Federal Candidate		Support	Office Sought:	House District:
Donald Trump		X Oppose	X President	
Calendar Year-To-Date Per Election for Office Sought		24601.92	Disbursement F 2016 Othe	or: X Primary General rr (specify) P Republican Primary
Full Name of Payee Hart Research Associates		🗌 Memo Ite	Date of I	
Mailing Address 1724 Connecticut Aver	nue NW		Amount	
City	State	Zip Code		42.86
Washington	DC	20009		on ID : B594863 Disbursement or Obligation
Purpose of Expenditure Persuasion calls		Category/ Type 004	02	
Name of Federal Candidate		Support	Office Sought:	House District:
Marco Rubio		X Oppose	President	
Calendar Year-To-Date Per Election for Office Sought	· · · · · · · ·	24601.92	Disbursement F 2016 Othe	or: X Primary General er (specify) ► Republican Primary
(a) SUBTOTAL of Itemized Independent	Expenditures		·· •	85.72
(b) SUBTOTAL of Unitemized Independe	ent Expenditures		••	
(c) TOTAL Independent Expenditures			••	
Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party comm	any candidate or authorized			
Deirdre Schifeling	[Electron	ically Filed] Date	04	11 2016
Signature				

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 19 OF 42 FOR LINE 24 OF FORM 3X
	DENTIFICATION NUMBER V
Planned Parenthood Votes	C00489799
Check if 24-hour report 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y
Full Name of Payee Memo Item Date of Publ Hart Research Associates Memo Item Memo Item	ic Distribution/Dissemination
That Research Associates	/ D D / Y Y Y Y 03 2016
Mailing Address 1724 Connecticut Avenue NW Amount	
City State Zip Code	42.86
Washington DC 20009 Transaction I	D: B594179 ursement or Obligation
Purpose of Expenditure Persuasion calls Category/ Type 004	/ <u>26</u> / <u>2016</u>
Name of Federal Candidate Support Office Sought:	House District:
Hillary Clinton	Senate State: SC
Calendar Year-To-Date Disbursement For:	Primary General
Per Election for Office Sought 1168609.16 2016 Other (s	pecify) ► _ Democratic Primary
	lic Distribution/Dissemination
Hart Research Associates	/ D D / Y Y Y Y 03 2016
Mailing Address 1724 Connecticut Avenue NW Amount	
City State Zip Code	42.86
Washington DC 20009 Transaction	D: B594180 pursement or Obligation
Purpose of Expenditure Category/	/ D D / Y Y Y Y
Persuasion calls 004 02	26 2016
Name of Federal Candidate Support Office Sought:	House District:
Ted Cruz Oppose President	Senate State: SC
Calendar Year-To-Date Disbursement For: Per Election for Office Sought 24601.92 2016	Primary General
Per Election for Office Sought	pecify) Republican Primary
(a) SUBTOTAL of Itemized Independent Expenditures	85.72
	00.12
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coopera with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the rep party committee) any political party committee or its agent.	
Deirdre Schifeling [Electronically Filed] Date 04 11	2016

TEMIZED INDEPENDENT EXPENDITUR	RES				PAGE 20 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC II	DENTIFICATION NUMBER V
Flatified Fateritiood Voles				С	C00489799
Check if 24-hour report 48-hour report	New re	port Amends repo		M	
Full Name of Payee Hart Research Associates		🗌 Memo It	tem Date	1 M	ic Distribution/Dissemination
Mailing Address 1724 Connecticut Avenue NW	1		Amou	02 nt	03 2016
City	State	Zip Code	- r		42.86
Washington	DC	20009			D : B594181 ursement or Obligation
Purpose of Expenditure Persuasion calls		Category/ Type 004		02	/ <u>26</u> / <u>2016</u>
Name of Federal Candidate		Support	Office Sough	nt:	House District:
Donald Trump		X Oppose	X Preside	ent	Senate State: SC
Calendar Year-To-Date Per Election for Office Sought		24601.92	Disbursemen 2016		X Primary General pecify) ▶ Republican Primary
Full Name of Payee		Memo Ite	em Date	of Publ	ic Distribution/Dissemination
Hart Research Associates				02	/ D D / Y Y Y Y 03 2016
Mailing Address 1724 Connecticut Avenue NW	I		Amou	ınt	
City	State	Zip Code			42.86
Washington	DC	20009			D: B594182 ursement or Obligation
Purpose of Expenditure Persuasion calls		Category/ Type 004		02	/ <u>26</u> / <u>2016</u>
Name of Federal Candidate		Support	Office Sough	nt:	House District:
Marco Rubio		X Oppose	X Presid	ent	Senate State: SC
Calendar Year-To-Date Per Election for Office Sought		24601.92	Disbursemer 2016		Primary General
(a) SUBTOTAL of Itemized Independent Expen	ditures				85.72
				-7-	
(b) SUBTOTAL of Unitemized Independent Exp	enditures		••		
(c) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee of	ndidate or authorize				
Deirdre Schifeling	[Electro	nically Filed] Date	04	D D D 11	/ Y Y Y Y Y 2016
Signature				<u> </u>	

ITEMIZED INDEPENDENT EXPEND	ITURES				PAGE 21 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDE	NTIFICATION NUMBER V
Planned Parenthood Votes				Сс	00489799
Check if 24-hour report 48-hour	report New re	eport Amends repo		M M /	
Full Name of Payee Hart Research Associates		🗌 Memo I	tem Date	of Public	Distribution/Dissemination
Halt Research Associates				^M 02 /	D D / Y Y Y Y 03 2016
Mailing Address 1724 Connecticut Aven	ue NW		Amo	unt	
City	State	Zip Code			42.86
Washington	DC	20009		action ID :	
Purpose of Expenditure Persuasion calls		Category/ Type 004		02 /	ement or Obligation 26 / Y Y Y Y Y 2016 2016
Name of Federal Candidate		Support	Office Soug	iht:	House District:
Hillary Clinton		Oppose	X Presid		Senate State: TX
Calendar Year-To-Date			Disburseme		Rimary General
Per Election for Office Sought		1168609.16	2016	Other (spe	cify) Democratic Primary
Full Name of Payee		Memo Ite	em Date	of Public	Distribution/Dissemination
Hart Research Associates				02 /	D D / Y Y Y Y 03 2016
Mailing Address 1724 Connecticut Aven	ue NW		Amo		
			Amo	Junt	
City	State	Zip Code			42.86
Washington	DC	20009		e of Disbur	sement or Obligation
Purpose of Expenditure Persuasion calls		Category/ Type 004		02 /	^D 26 / Y Y Y Y Y 2016
Name of Federal Candidate		Support	Office Soug	ght:	House District:
Ted Cruz		X Oppose	X Presi	dent	Senate State: <u>TX</u>
Calendar Year-To-Date			Disburseme	ent For:	Primary General
Per Election for Office Sought		24601.92	2016	Other (spe	cify) ► Republican Primary
(a) SUBTOTAL of Itemized Independent I	Expenditures		·· •	-7-	85.72
(b) SUBTOTAL of Unitemized Independent	nt Expenditures		••		
(c) TOTAL Independent Expenditures			•	-7-	
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized				
Deirdre Schifeling	[Electro	onically Filed] Date	o 04	D D D 11	2016
Signature					

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPEN	DITURES			PAGE 22 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER
Planned Parenthood Votes			C	
Check if 24-hour report 48-hour	report New rep	ort Amends repo	ort filed on	
Full Name of Payee Hart Research Associates		Memo I	M	
Mailing Address 1724 Connecticut Aver	nue NW		02 Amount	03 2016
City	State	Zip Code		42.86
Washington	DC	20009		bn ID : B595403 Disbursement or Obligation
Purpose of Expenditure Persuasion calls		Category/ Type 004	02	
Name of Federal Candidate		Support	Office Sought:	House District:
Donald Trump		X Oppose	X President	Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		24601.92	Disbursement For 2016 Othe	or: X Primary General r (specify) Republican Primary
Full Name of Payee Hart Research Associates		🗌 Memo Ite	Date of F	
Mailing Address 1724 Connecticut Aver	nue NW		Amount	
City	State	Zip Code		42.86
Washington	DC	20009		on ID : B595404 Disbursement or Obligation
Purpose of Expenditure Persuasion calls		Category/ Type 004	02	
Name of Federal Candidate		Support	Office Sought:	House District:
Marco Rubio		X Oppose	President	Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought	· · · · · · · ·	24601.92	Disbursement F 2016 Othe	or: X Primary General
(a) SUBTOTAL of Itemized Independent	Expenditures			85.72
(b) SUBTOTAL of Uniternized Independe	ent Expenditures		•	47. 1 1 47. 1 1 47. 1
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party comm	any candidate or authorized			
Deirdre Schifeling	[Electron	ically Filed] Date	04	11 2016
Signature				

ITEMIZED INDEPENDENT EXPEND	ITURES				PAGE 23 OF 42 FOR LINE 24 OF FORM	
NAME OF COMMITTEE (In Full)				FEC II	L DENTIFICATION NUMBER	R 🔻
Planned Parenthood Votes				С	C00489799	
				•		
Check if 24-hour report 48-hour	report New re	eport Amends repo		M /		Y
Full Name of Payee Hart Research Associates		Memo I	tem Date of	of Publi	c Distribution/Disseminatic	n
			M	02	/ D D / Y Y Y 03 2016	Y
Mailing Address 1724 Connecticut Aven	ue NW		Amou	nt		
City	State	Zip Code			42.86	;
Washington	DC	20009			D: B595405 ursement or Obligation	_
Purpose of Expenditure Persuasion calls		Category/ Type 004		02	26 / Y Y Y 26 / 2016	Y
Name of Federal Candidate		Support	Office Sough	it:	House District:	
Hillary Clinton		Oppose	X Preside		Senate State:/	
Calendar Year-To-Date			Disbursemen	t For:	Primary Gen	
Per Election for Office Sought		1168609.16	2016	ther (sp	Decify) ► Democratic Prin	nary
Full Name of Payee		Memo Ite	em Date	of Publi	c Distribution/Dissemination	on
Hart Research Associates			N	02	/ D D / Y Y Y 03 2016	Y
Mailing Address 1724 Connecticut Aven	ue NW		Amou	int		_
City	State	Zip Code			42.86	;
Washington	DC	20009			D : B595406	_
Purpose of Expenditure		Category/	Date	of Disbu	ursement or Obligation	Y
Persuasion calls		Type 004		02	26 2016	
Name of Federal Candidate		Support	Office Sough	nt:	House District:	
Ted Cruz		X Oppose	X Preside	ent	Senate State: V	Α
Calendar Year-To-Date			Disbursemer	nt For:	Primary Gen	ieral
Per Election for Office Sought		24601.92	2016 C	Other (sp	pecify) Republican Prir	nary
(a) SUBTOTAL of Itemized Independent	Expenditures				85.72	П
						_
(b) SUBTOTAL of Unitemized Independent	nt Expenditures		• •			
(c) TOTAL Independent Expenditures						-
(c) TOTAL independent Expenditures			••	-7-		_
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized					
Deirdre Schifeling			M M /	DD	/	
Signature	[Electro	pnically Filed] Date	e 04	11	2016	

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPEN	DITURES			PAGE 24 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER
Planned Parenthood Votes			C	
Check if 24-hour report 48-hour	report New rep	ort Amends repo	ort filed on	
Full Name of Payee Hart Research Associates		Memo I	M	
Mailing Address 1724 Connecticut Aver	nue NW		02 Amount	03 2016
City	State	Zip Code		42.86
Washington	DC	20009		on ID : B595407 Disbursement or Obligation
Purpose of Expenditure Persuasion calls		Category/ Type 004	M 02	
Name of Federal Candidate		Support	Office Sought:	House District:
Donald Trump		X Oppose	X President	Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7 7 7	24601.92	Disbursement Fo 2016 Othe	or: X Primary General r (specify) ► Republican Primary
Full Name of Payee Hart Research Associates		🗌 Memo Ite	Date of F	
Mailing Address 1724 Connecticut Aver	nue NW		Amount	
City	State	Zip Code		42.86
Washington	DC	20009		on ID : B595408 Disbursement or Obligation
Purpose of Expenditure Persuasion calls		Category/ Type 004	02	
Name of Federal Candidate		Support	Office Sought:	House District:
Marco Rubio		X Oppose	President	Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	· · · · · · · ·	24601.92	Disbursement F 2016 Othe	or: X Primary General
(a) SUBTOTAL of Itemized Independent	Expenditures			85.72
(b) SUBTOTAL of Unitemized Independe	ent Expenditures		• •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party comm	any candidate or authorized			
Deirdre Schifeling	[Electron	ically Filed] Date	04	11 2016
Signature				

ITEMIZED INDEPENDENT EXPENDITUI	ne5			PAGE 25 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New re	eport Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Hart Research Associates		Memo l	tem Da	ate of Public Distribution/Dissemination
				02 / D D / Y Y Y Y 02 03 2016
Mailing Address 1724 Connecticut Avenue NV	V		Ar	mount
City	State	Zip Code		42.86
Washington	DC	20009		ansaction ID : B595409 late of Disbursement or Obligation
Purpose of Expenditure Persuasion calls		Category/ Type 004		02 / 26 / Y Y Y Y 02 / 26
Name of Federal Candidate		Support	Office Sc	ought: House District:
Hillary Clinton		Oppose	X Pre	
Calendar Year-To-Date				ement For: X Primary General
Per Election for Office Sought		1168609.16	2016	Other (specify) Democratic Primary
Full Name of Payee		Memo Ite	em D	Date of Public Distribution/Dissemination
Hart Research Associates				02 03 Y Y Y Y Y 02 03 2016
Mailing Address 1724 Connecticut Avenue NV	V		A	mount
City	State	Zip Code	F	42.86
Washington	DC	20009		ansaction ID : B595410
Purpose of Expenditure		Category/	D:	Date of Disbursement or Obligation
Persuasion calls		Type 004		02 26 2016
Name of Federal Candidate		Support	Office So	ought: House District:
Ted Cruz		X Oppose		resident Senate State: <u>MI</u>
Calendar Year-To-Date				ement For: X Primary General
Per Election for Office Sought		24601.92	2016	Other (specify) Republican Primary
(a) SUBTOTAL of Itemized Independent Exper	ditures		-	85.72
(b) SUBTOTAL of Unitemized Independent Exp	penditures			
(c) TOTAL Independent Expenditures			·· •	
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	ndidate or authoriz			
Deirdre Schifeling	[Electr]	onically Filed]	o 04	/ D D / Y Y Y Y 11 2016
Signature		Date	5 04	

ITE	EMIZED INDEPENDENT EXPENDIT	JRES				PAGE 26 FOR LINE 24	OF 42 4 OF FORM 3X
	AME OF COMMITTEE (In Full)				FEC II	L DENTIFICATIO	N NUMBER 🔻
F	Planned Parenthood Votes				С	C00489799	
Ch	neck if 24-hour report 48-hour repo	ort New re	port Amends rep	ort filed o	n	/ D D /	Y Y Y Y Y
	Full Name of Payee		Memo I	tem	Date of Publi	ic Distribution/E	Dissemination
	Hart Research Associates				02 ^M	/ D D / 03	y y y y 2016
	Mailing Address 1724 Connecticut Avenue	١W			Amount		2010
	City	State	Zip Code				42.86
	Washington	DC	20009		ransaction II		
	Purpose of Expenditure Persuasion calls		Category/ Type 004			ursement or O	2016
	Name of Federal Candidate		Support	Office \$	Sought:	House D	District:
	Donald Trump		X Oppose		President	Senate	State: MI
	Calendar Year-To-Date Per Election for Office Sought		24601.92	Disburs 2016	ement For: Other (si	Primary Decify) ► Rep	General General
	Full Name of Payee		Memo It	em		ic Distribution/[
	Hart Research Associates				^M M 02	/ D D / 03 /	2016
	Mailing Address 1724 Connecticut Avenue	١W			Amount	00	2010
	City	State	Zip Code				42.86
	Washington	DC	20009		ransaction II	D: B595412 ursement or O	bligation
	Purpose of Expenditure Persuasion calls		Category/ Type 004		02	/ <u>26</u> /	2016
	Name of Federal Candidate		Support	Office	Sought:	House [District:
	Marco Rubio		X Oppose		President	Senate	State: MI
	Calendar Year-To-Date Per Election for Office Sought		24601.92	Disburs 2016	sement For:	✓ Primary pecify) ►Rep	General General
	(a) SUBTOTAL of Itemized Independent Exp	enditures		-			85.72
	(b) SUBTOTAL of Unitemized Independent E	xpenditures		··· ►			
	(c) TOTAL Independent Expenditures			••• ►			
	Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorize					
	Deirdre Schifeling	[Electro	nically Filed] Dat	e 04	M / D D	/ ¥ 2016	
	Signature						- territ

IT	EMIZED INDEPENDENT EXPEND	ITURES				PAGE 27 OF 42 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER V
F	Planned Parenthood Votes				С	C00489799
Cł	neck if 24-hour report 48-hour re	eport 📃 New rep	port Amends repo	ort filed on	M = M	
	Full Name of Payee 76 Words		Memo II	tem Da	ate of Publ	ic Distribution/Dissemination
					^M 01	21 2016
	Mailing Address 1806 Vernon St, NW #10	00		Ar	nount	
	City	State	Zip Code			4000.00
	Washington	DC	20009			D: B592913 ursement or Obligation
	Purpose of Expenditure Payment for IE originally reported on 2016 Monthly Report. See Schedule D	FEC February	Category/ Type 004		02 ^M	/ D D / Y Y Y Y 08 / 2016
	Name of Federal Candidate		Support	Office So	ought:	House District:
	Hillary Clinton		Oppose	X Pre	esident	Senate State: <u>IA</u>
	Calendar Year-To-Date Per Election for Office Sought		1168609.16	Disburser 2016	ment For:	Primary General
			Memo Ite			
	Full Name of Payee Planned Parenthood Votes S	outh Atlantic			ate of Publ	ic Distribution/Dissemination
	Mailing Address				02	09 2016
	100 S Boylan Ave			A	mount	
	City	State	Zip Code	— [25695.33
	Raleigh	NC	27603			D: B594184 bursement or Obligation
	Purpose of Expenditure Persuasion calls		Category/ Type 004		02	/ D D / Y Y Y Y 22 / 2016
	Name of Federal Candidate		Support	Office So	ought:	House District:
	Hillary Clinton		Oppose		esident	Senate State: SC
	Calendar Year-To-Date Per Election for Office Sought	7 7 7	1168609.16	Disburse 2016	ment For:	✓ Primary General pecify) ▶ Democratic Primary
	(a) SUBTOTAL of Itemized Independent E	xpenditures		- •		29695.33
	(b) SUBTOTAL of Unitemized Independen	t Expenditures				· · · · · · · · ·
	(c) TOTAL Independent Expenditures			••		
	Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commi	ny candidate or authorize				
	Deirdre Schifeling	[Electro	nically Filed] Date	e 04	/ D D 11	/ Y Y Y Y Y Y 2016
	Signature					

ITE	EMIZED INDEPENDENT EXPEND	TURES				PAGE 28	OF 42 4 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC I		N NUMBER ▼
F	Planned Parenthood Votes				С	C00489799	
					M	/ D D /	Y Y Y Y
Ch	eck if24-hour report48-hour re	eport New rep	port Amends repo	ort filed on	L		
	Full Name of Payee Planned Parenthood Votes Sout	h Atlantic	Memo I	tem Da	te of Publ	ic Distribution/	Dissemination
					02	/ D D /	2016
	Mailing Address 100 S Boylan Ave			An	nount		
	City	State	Zip Code				9906.75
	Raleigh	NC	27603			D: B594185 oursement or C	Obligation
	Purpose of Expenditure Persuasion canvasses		Category/ Type 004		02	/ D D / 22	2016
	Name of Federal Candidate		Support	Office So	ught:	House	District:
	Hillary Clinton		Oppose	X Pre	sident	Senate	State: SC
	Calendar Year-To-Date		1168609.16	Disburser	_	X Primary	
	Per Election for Office Sought	y			Other (s	pecify) ► Der	mocratic Primary
	Full Name of Payee Planned Parenthood Votes S	outh Atlantic	Memo Ite	em Da	ate of Pub	lic Distribution/	Dissemination
	Mailing Address				02	09	2016
	100 S Boylan Ave			Ar	nount		
	City	State	Zip Code				6604.50
	Raleigh	NC	27603			D: B594186 oursement or C	Dbligation
	Purpose of Expenditure Volunteer recruitment		Category/ Type 004		02	/ D D / 22	2016
	Name of Federal Candidate		Support	Office So	ught:	House	District:
	Hillary Clinton		Oppose	X Pre	sident	Senate	State: SC
	Calendar Year-To-Date Per Election for Office Sought		1168609.16	Disburser 2016	-	Primary	General
				_			
	(a) SUBTOTAL of Itemized Independent E	xpenditures		·· •			16511.25
	(b) SUBTOTAL of Unitemized Independen	t Expenditures		• •			
	(c) TOTAL Independent Expenditures			••			
	Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commi	ny candidate or authorize					
	Deirdre Schifeling	[Electro	nically Filed] Date	- 04	/ D D	201	
	Signature						

ITEMIZED INDEPENDENT EXPEND	NIURES				PAGE 29 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC II	DENTIFICATION NUMBER V
Planned Parenthood Votes				С	C00489799
Check if 24-hour report 48-hour	report New re	port Amends repo		M /	
Full Name of Payee		Memo It	tem Date	of Publi	c Distribution/Dissemination
Stones' Phones			N	01	27 2016
Mailing Address 41-750 Rancho Las Pa	mas Dr #E-3		Amou	nt	
City	State	Zip Code			3983.38
Rancho Mirage	CA	92270			D : B597013
Purpose of Expenditure Partial payment for IE originally reported February Monthly Report. See Schedule		Category/ Type 004			ursement or Obligation
Name of Federal Candidate		X Support	Office Sough	nt:	House District:
Hillary Clinton		Oppose	X Preside	ent	Senate State: IA
Calendar Year-To-Date			Disbursemer	t For:	X Primary General
Per Election for Office Sought		1168609.16	2016	ther (sp	Democratic Primary
Full Name of Payee		🗌 Memo Ite	em Date	of Publi	ic Distribution/Dissemination
Screen Strategies Media			7	02	/ D D / Y Y Y Y 17 2016
Mailing Address 11150 Fairfax Blvd, Ste	550		Amou	Int	
City	State	Zip Code			199995.00
Fairfax	VA	22030			D : B594864 ursement or Obligation
Purpose of Expenditure		Category/		M M	/ D D / Y Y Y Y
TV, Cable media buy		Type 004	L	02	16 2016
Name of Federal Candidate		X Support	Office Sough	nt:	House District:
Hillary Clinton		Oppose	X Presid	ent	Senate State: NV
Calendar Year-To-Date			Disbursemer	nt For:	Primary General
Per Election for Office Sought		1168609.16	2016	Other (sp	pecify) Democratic Primary
(a) SUBTOTAL of Itemized Independent	Expenditures		·· •	-7-	203978.38
(b) SUBTOTAL of Unitemized Independe	nt Expenditures		••		
(c) TOTAL Independent Expenditures			•	-7-	
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorize				
Deirdre Schifeling	[Electro	nically Filed] Date	04 /	D D D 11	/ Y Y Y Y Y 2016
Signature					

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURE	S			PAGE 30 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New rep	port Amends repo		M / D D / Y Y Y Y Y
Full Name of Payee		🗙 Memo l	tem Date o	f Public Distribution/Dissemination
76 Words			М	02 17 2016
Mailing Address 1806 Vernon St, NW #100			Amour	nt
City	State	Zip Code		20000.00
Washington	DC	20009		tion ID : B594865 f Disbursement or Obligation
Purpose of Expenditure Production of TV, cable, online ads. See Schedule	e D	Category/ Type 004	M	
Name of Federal Candidate		X Support	Office Sought	: House District:
Hillary Clinton		Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought		1168609.16	Disbursement 2016	For: X Primary General her (specify) ▶ Democratic Primary
Full Name of Payee		Memo Ite	em Date o	of Public Distribution/Dissemination
Blueprint Interactive			М	02 17 2016
Mailing Address 2229 North Pollard St			Amour	nt
City	State	Zip Code		44798.19
Arlington	VA	22207		ction ID : B594866 of Disbursement or Obligation
Purpose of Expenditure Online ad buy		Category/ Type 004	M	02 / D D / Y Y Y Y 16 / 2016
Name of Federal Candidate		Support	Office Sought	t: House District:
Hillary Clinton		Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought	y y y	1168609.16	Disbursement 2016	t For: X Primary General
(a) SUBTOTAL of Itemized Independent Expendit	ures		·· •	44798.19
(b) SUBTOTAL of Unitemized Independent Exper	nditures		••	
(c) TOTAL Independent Expenditures				7
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any cand party committee) any political party committee or	idate or authorize			
Deirdre Schifeling	[Electron	nically Filed] Date	e 04	11 2016
Signature				

ITEMIZED INDEPENDENT EXPEND	ITURES			PAGE 31 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER V
Planned Parenthood Votes				С С00489799
Check if 24-hour report 48-hour	report New rep	port Amends repo		
Full Name of Payee		Memo It	tem Date	of Public Distribution/Dissemination
Stones' Phones			N	02 17 2016
Mailing Address 41-750 Rancho Las Pal	mas Dr #E-3		Amou	int
City	State	Zip Code		20567.57
Rancho Mirage	CA	92270		action ID : B594867 of Disbursement or Obligation
Purpose of Expenditure Persuasion calls		Category/ Type 004		02 / D D / Y Y Y Y 02 / 26 / 2016
Name of Federal Candidate		Support	Office Sough	nt: House District:
Hillary Clinton		Oppose	X Preside	ent Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought		1168609.16	Disbursemen	nt For:
Full Name of Payee	,	Memo Ite		of Public Distribution/Dissemination
Planned Parenthood of NYC	Action Fund			M M / D D / Y Y Y Y
Mailing Address 26 Bleecker St			Amou	02 19 2016 unt
City	State	Zip Code		5000.00
New York	NY	10012		action ID : B594869 of Disbursement or Obligation
Purpose of Expenditure Travel costs for volunteers		Category/ Type 004		$ \begin{array}{c} 1 \\ 02 \\ 02 \\ \end{array} \begin{array}{c} 22 \\ 22 \end{array} \begin{array}{c} 1 \\ 22 \\ 2016 \\ \end{array} \end{array} $
Name of Federal Candidate		Support	Office Sough	ht: House District:
Hillary Clinton		Oppose	X Presid	lent Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought		1168609.16	Disbursemer 2016	nt For: Primary General Other (specify) Democratic Primary
(a) SUBTOTAL of Itemized Independent	Expenditures		• •	25567.57
(b) SUBTOTAL of Unitemized Independent	nt Expenditures		·· •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	iny candidate or authorize			
Deirdre Schifeling	[Electro	nically Filed] Date	04 /	11 / Y = Y = Y = Y 11 2016
Signature				

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT	EXPENDITURES		Ľ	PAGE 32 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
Planned Parenthood V	otes			00489799
Check if24-hour report	48-hour report	report Amends repo	ort filed on	D = D / Y = Y = Y = Y
Full Name of Payee		🗙 Memo I	tem Date of Public	Distribution/Dissemination
Blueprint Interactive			02	24 / Y Y Y Y 2016
Mailing Address 2229 North F	Pollard St		Amount	
City	State	Zip Code		308990.00
Arlington	VA	22207	Transaction ID : Date of Disburg	B595395 sement or Obligation
Purpose of Expenditure Online advertising (media buy) Schedule D). See transaction B596857 and	Category/ Type 004	/	
Name of Federal Candidate		X Support	Office Sought:	House District:
Hillary Clinton		Oppose	X President	Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office So	pught	1168609.16	2016	Primary General cify) Democratic Primary
Full Name of Payee Blueprint Interactive Mailing Address 2229 North F	Pollard St	🗌 Memo Ita	Date of Public	Distribution/Dissemination
City Arlington	State VA	Zip Code 22207	Transaction ID :	303298.46 : B596857 sement or Obligation
Purpose of Expenditure Online advertising (media buy B595395). Partial payment for transaction	Category/ Type 004		23 / Y Y Y Y 2016
Name of Federal Candidate		X Support	Office Sought:	House District:
Hillary Clinton		Oppose	X President	Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Se	pught	1168609.16	2016	Primary General cify) Democratic Primary
(a) SUBTOTAL of Itemized Inc	lependent Expenditures			303298.46
(b) SUBTOTAL of Unitemized	Independent Expenditures		• •	
(c) TOTAL Independent Expen	ditures		•••	
	ify that the independent expenditur estion of, any candidate or authoriz arty committee or its agent.			
Deirdre Schifeling	[Electr	ronically Filed] Date	04 / D D	/ Y Y Y Y Y 2016
Signature				

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 33 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER V
Planned Parenthood Votes		C C00489799
Check if 24-hour report 48-hour report N	ew report Amends report	filed on / / / Y Y Y Y Y Y Y
Full Name of Payee	🗙 Memo Iten	Date of Public Distribution/Dissemination
Blueprint Interactive		02 24 Y Y Y Y 02 24 2016
Mailing Address 2229 North Pollard St		Amount
City State	Zip Code	125519.00
Arlington VA	22207	Transaction ID : B595396
Purpose of Expenditure Online advertising (media buy). See transaction B596858 and Schedule D	Category/ Type 004	Date of Disbursement or Obligation
Name of Federal Candidate	X Support	Office Sought: House District:
Hillary Clinton	Oppose	President Senate State: MI
Calendar Year-To-Date		Disbursement For: X Primary General
Per Election for Office Sought	1168609.16	2016 Other (specify) ► Democratic Primary
Full Name of Payee	Memo Item	Date of Public Distribution/Dissemination
Blueprint Interactive		02 24 2016
Mailing Address 2229 North Pollard St		Amount
City State	Zip Code	123206.94
Arlington VA	22207	Transaction ID : B596858 Date of Disbursement or Obligation
Purpose of Expenditure Online advertising (media buy). Partial payment for transactio B595396	n Category/ Type 004	02 / 23 / 2016
Name of Federal Candidate	X Support	Office Sought: House District:
Hillary Clinton	Oppose	President Senate State: <u>MI</u>
Calendar Year-To-Date		Disbursement For: Reneral General
Per Election for Office Sought	1168609.16	2016 Other (specify) ▶ Democratic Primary
(a) SUBTOTAL of Itemized Independent Expenditures		123206.94
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent exper with, or at the request or suggestion of, any candidate or aut party committee) any political party committee or its agent.		
Deirdre Schifeling [1	Electronically Filed] Date	04 11 2016
Signature	240	

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 34 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER V
Planned Parenthood Votes		C C00489799
Check if 24-hour report 48-hour report Ne	ew report Amends report f	iled on
Full Name of Payee	🗙 Memo Item	Date of Public Distribution/Dissemination
Blueprint Interactive		02 / D D / Y Y Y Y 02 24 2016
Mailing Address 2229 North Pollard St		Amount
City State	Zip Code	135529.00
Arlington VA	22207	Transaction ID : B595397 Date of Disbursement or Obligation
Purpose of Expenditure Online advertising (media buy). See transaction B596859 and Schedule D	Category/ Type 004	
Name of Federal Candidate	X Support O	ffice Sought: House District:
Hillary Clinton	Oppose	X President State: VA
Calendar Year-To-Date		isbursement For: X Primary General
Per Election for Office Sought	1168609.16	Other (specify) Democratic Primary
Full Name of Payee Blueprint Interactive	Memo Item	Date of Public Distribution/Dissemination
		02 24 2016
Mailing Address 2229 North Pollard St		Amount
City State	Zip Code	133032.60
Arlington VA	22207	Transaction ID : B596859 Date of Disbursement or Obligation
Purpose of Expenditure Online advertising (media buy). Partial payment for transaction B595397	Category/ Type 004	$\begin{array}{c c} & & & \\ & & & & \\ & & & & \\ & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\$
Name of Federal Candidate	X Support O	ffice Sought: House District:
Hillary Clinton	Oppose	X President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		isbursement For: X Primary General 016 Other (specify) ► Democratic Primary
(a) SUBTOTAL of Itemized Independent Expenditures	••••••	133032.60
(b) CURTOTAL of Unitarized Independent Eveneditures		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	Þ	
Under penalty of perjury I certify that the independent expend with, or at the request or suggestion of, any candidate or auth party committee) any political party committee or its agent.		
Deirdre Schifeling [E	lectronically Filed] Date	04 11 2016
Signature		

TEMIZED INDEPENDENT EXPENDITURES		PAGE 35 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼
Planned Parentnood Votes		C C00489799
Check if 24-hour report 48-hour report	New report Amends report f	iled on
Full Name of Payee 76 Words	🔀 Memo Item	Date of Public Distribution/Dissemination
Mailing Address 1806 Vernon St, NW #100		02 24 2016 Amount
City State	Zip Code	8122.64
Washington DC	20009	Transaction ID : B595398
Purpose of Expenditure Production of online ads. See Schedule D	Category/ Type 004	Date of Disbursement or Obligation
Name of Federal Candidate	Support O	ffice Sought: House District:
Hillary Clinton	Oppose	X President State: TX
Calendar Year-To-Date Per Election for Office Sought		isbursement For: X Primary General D16 Other (specify) ► Democratic Primary
Full Name of Payee	× Memo Item	Date of Public Distribution/Dissemination
76 Words		02 24 2016
Mailing Address 1806 Vernon St, NW #100		Amount
City State	Zip Code	3299.61
Washington DC	20009	Transaction ID : B595399 Date of Disbursement or Obligation
Purpose of Expenditure Production of online ads. See Schedule D	Category/ Type	
Name of Federal Candidate	X Support C	ffice Sought: House District:
Hillary Clinton	Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		isbursement For: X Primary General 016 Other (specify) ► Democratic Primary
(a) SUBTOTAL of Itemized Independent Expenditures		0.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	•	
Under penalty of perjury I certify that the independent expe with, or at the request or suggestion of, any candidate or an party committee) any political party committee or its agent.		
Deirdre Schifeling	[Electronically Filed] Date	04 / Y Y Y Y 04 11 2016
Signature		

TEMIZED INDEPENDENT EXPENDITURES		PAGE 36 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER V
Planned Parenthood Votes		С С00489799
Check if 24-hour report 48-hour report	New report Amends report	filed on
Full Name of Payee 76 Words	🔀 Memo Item	
Mailing Address		02 24 2016
1806 Vernon St, NW #100		Amount
City State	Zip Code	3562.75
Washington DC	20009	Transaction ID: B595400 Date of Disbursement or Obligation
Purpose of Expenditure Production of online ads. See Schedule D	Category/ Type 004	
Name of Federal Candidate	X Support C	Office Sought: House District:
Hillary Clinton	Oppose	President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2016 Other (specify) ► Democratic Primary
Full Name of Payee	🗙 Memo Item	Date of Public Distribution/Dissemination
Stones' Phones		02 26 2016
Mailing Address 41-750 Rancho Las Palmas Dr #E-3		Amount
City State	Zip Code	22551.31
Rancho Mirage CA	92270	Transaction ID : B595414 Date of Disbursement or Obligation
Purpose of Expenditure Persuasion calls. See Schedule D(Amendment to earlier estimate)	Category/ Type 004	
Name of Federal Candidate	X Support	Office Sought: House District:
Hillary Clinton	Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: X Primary General 2016 Other (specify) ▶ Democratic Primary
(a) SUBTOTAL of Itemized Independent Expenditures		0.00
	'	
(b) SUBTOTAL of Uniternized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent exper- with, or at the request or suggestion of, any candidate or au party committee) any political party committee or its agent.		
Deirdre Schifeling	Electronically Filed] Date	04 / D D / Y Y Y Y Y Y 04 11 2016
Signature		

TEMIZED INDEPENDENT EXPEND	DITURES				PAGE 37 OF 42 FOR LINE 24 OF FORM 3X
				FEC I	DENTIFICATION NUMBER V
Planned Parenthood Votes				С	C00489799
Check if 24-hour report 48-hour	report New re	port Amends repo		M = M	
Full Name of Payee		🗙 Memo l	tem Date	of Publ	ic Distribution/Dissemination
Stones' Phones			- I	^M 02	/ D D / Y Y Y Y 26 2016
Mailing Address 41-750 Rancho Las Pa	lmas Dr #E-3		Amo		
City	State	Zip Code			105298.62
Rancho Mirage	CA	92270			D : B595415
Purpose of Expenditure Persuasion calls. See Schedule D(Ameno estimate)	dment to earlier	Category/ Type 004	Date	of Disb	ursement or Obligation
Name of Federal Candidate		Support	Office Soug	ıht:	House District:
Hillary Clinton		Oppose	X Presi	L	Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		1168609.16	Disburseme 2016		Primary General
		X Memo Ite	· · · · ·		
Full Name of Payee Stones' Phones			Date	e of Publ	lic Distribution/Dissemination
Mailing Address 41 750 Bancha Los Ba				02	26 2016
41-750 Rancho Las Pa	lmas Dr #E-3		Amo	ount	
City	State	Zip Code			19368.55
Rancho Mirage	CA	92270			D : B595416
Purpose of Expenditure Persuasion calls. See Schedule D (Amer estimate)	ndment to earlier	Category/ Type 004			ursement or Obligation / D / Y Y Y
Name of Federal Candidate		X Support	Office Sou	ght:	House District:
Hillary Clinton		Oppose	X Presi	dent [Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		1168609.16	Disburseme 2016		Primary General specify) Democratic Primary
(a) SUBTOTAL of Itemized Independent	Expenditures				0.00
				-7	
(b) SUBTOTAL of Unitemized Independe	nt Expenditures		• •		
(c) TOTAL Independent Expenditures			••		
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorize				
Deirdre Schifeling	[Electro	onically Filed]	04	11 D	2016
Signature	-	Date			

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 38 OF 42 FOR LINE 24 OF FORM 3X						
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER						
Planned Parenthood Votes	C C00489799						
Check if 24-hour report 48-hour report New report Amends report f	iled on						
Full Name of Payee Memo Item	Date of Public Distribution/Dissemination						
Mailing Address 1724 Connecticut Avenue NW	02 03 2016 Amount						
City State Zip Code	8057.12						
CityStateZip CodeWashingtonDC20009	Transaction ID : B597066 Date of Disbursement or Obligation						
Purpose of Expenditure Payment for nationwide unitemized independent expenditures. See text explanation on page 39	02 / D D / Y Y Y Y 26 / 2016						
Name of Federal Candidate Support O	ffice Sought: House District:						
	President Senate State:						
	isbursement For: Primary General D16 Other (specify) ► Not Applicable						
Full Name of Payee Itzamna Translations Company	Date of Public Distribution/Dissemination						
Mailing Address P.O. Box 1015	Amount						
City State Zip Code	2.59						
Glendale AZ 85311	Transaction ID : B598485 Date of Disbursement or Obligation						
Purpose of Expenditure Translation feeCategory/ Type004	02 / D D / Y Y Y Y 17 2016						
Name of Federal Candidate Support O	ffice Sought: House District:						
Hillary Clinton Oppose	President Senate State: NV						
Calendar Year-To-Date Per Election for Office Sought	isbursement For: X Primary General 016 Other (specify) ► Democratic Primary						
(a) SUBTOTAL of Itemized Independent Expenditures	8057.12						
(b) SUBTOTAL of Unitemized Independent Expenditures							
(c) TOTAL Independent Expenditures							
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eight party committee) any political party committee or its agent.							
Deirdre Schifeling [Electronically Filed] Date	04 / 11 2016						
Signature							

:97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F + H9 A = N5 H= C B

Form/Schedule: SE Transaction ID : B597066

Regarding Schedule E transaction B597066: All of the items on line 21b and in Schedule E which list Hart Research as the payee are related to the same telephone survey. The bulk of this poll was allocated to general research and is itemized on line 21b. The remainder of the poll carried express advocacy messages for/against certain candidates in the presidential primary to a nationwide audience. The cost allocation per primary state of this nationwide independent expenditure as of the date of the poll totals \$171.44. Where the committee made other independent expenditures in the presidential race in a given state (MI, NV, SC, TX, and VA), thus triggering 24 hour reporting requirements, the committee reported the precise per candidate allocation on previously filed 24 hour reports for the portion of this nationwide I.E., which allocations are repeated herein. B597066 represents the remaining unitemized independent expenditure allocation of this poll in the states where the committee did not trigger 24- or 48-hour reporting requirements.

Form/Schedule: SE Transaction ID: B597066

Regarding Schedule E transaction B598489: All of the items in Schedule E, which list Itzamna Translations Company as the payee, are related to the same nationwide independent expenditure. The cost allocation per primary state of this nationwide independent expenditure as of the date of its dissemination totals \$2.59. Where the committee made other independent expenditures in the presidential race in a given state (MI, NV, SC, TX, and VA) which triggered 24 hour reporting requirements, the committee reports the precise per candidate allocation for the portion of this nationwide I.E. B598489 represents the remaining uniternized independent expenditure allocation in the states where the committee did not trigger 24- or 48-hour reporting requirements

TEMIZED INDEPENDENT EXPENDIT	URES			PAGE 40 OF 42 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER V
				С С00489799
Check if 24-hour report 48-hour rep	ort New re	eport Amends repo		
Full Name of Payee		🗙 Memo It	em Date	of Public Distribution/Dissemination
Itzamna Translations Company			M	02 / D D / Y Y Y Y 17 2016
Mailing Address P.O. Box 1015			Amou	nt
City	State	Zip Code		2.59
Glendale	AZ	85311		ction ID : B598486 of Disbursement or Obligation
Purpose of Expenditure Translation fee		Category/ Type 004		02 / D D / Y Y Y Y 02 / 17 / 2016
Name of Federal Candidate		Support	Office Sough	it: House District:
Hillary Clinton		Oppose	X Preside	ent Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought		1168609.16	Disbursemen 2016	tt For: Primary General General Other (specify) Democratic Primary
Full Name of Payee		🗙 Memo Ite		of Public Distribution/Dissemination
Itzamna Translations Company	,			
Mailing Address P.O. Box 1015			Amou	02 17 2016 int
City	State	Zip Code		2.59
Glendale	AZ	85311		action ID : B598487 of Disbursement or Obligation
Purpose of Expenditure Translation fee		Category/ Type 004		02 / 17 / 2016
Name of Federal Candidate		X Support	Office Sough	nt: House District:
Hillary Clinton		Oppose	X Preside	ent Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		1168609.16	Disbursemer 2016	tt For:
(a) SUBTOTAL of Itemized Independent Exp	enditures		• •	0.00
(b) SUBTOTAL of Unitemized Independent E	Expenditures		•	777-
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the ind with, or at the request or suggestion of, any party committee) any political party committe	candidate or authorize			
Deirdre Schifeling	[Electro	onically Filed] Date	M M /	11 2016
Signature				

ITE	EMIZED INDEPENDENT EXPENDITURES			PAGE 41 OF 42 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼
Г	Tanned Parenthood Voles			C C00489799
Ch	neck if 24-hour report 48-hour report New rep	ort Amends repo		
	Full Name of Payee	🗙 Memo It	em Date	of Public Distribution/Dissemination
	Itzamna Translations Company			02 17 Y Y Y Y 02 17 2016
	Mailing Address P.O. Box 1015		Amoı	unt
	City State	Zip Code		2.59
	Glendale AZ	85311		action ID : B598488 of Disbursement or Obligation
	Purpose of Expenditure Translation fee	Category/ Type 004		M M / D D / Y Y Y Y 02 7 2016 7 2016
	Name of Federal Candidate	Support	Office Sougl	ht: House District:
	Hillary Clinton	Oppose	X Presid	lent Senate State: VA
	Calendar Year-To-Date Per Election for Office Sought	1168609.16	Disbursemer	nt For: X Primary General
	Full Name of Payee	🗙 Memo Ite		of Public Distribution/Dissemination
	Itzamna Translations Company		_	M M / D D / Y Y Y Y
	Mailing Address P.O. Box 1015		Amo	02 17 2016 unt
	City State	Zip Code		111.49
	Glendale AZ	85311		action ID : B598489 of Disbursement or Obligation
	Purpose of Expenditure Unitemized nationwide independent expenditures. See text explanation on page 39.	Category/ Type 004		02 / 17 / 2016
	Name of Federal Candidate	Support	Office Soug	ht: House District:
	Nationwide Unitemized	Oppose	X Presid	lent Senate State: US
	Calendar Year-To-Date Per Election for Office Sought	8168.61	Disburseme 2016	nt For: Primary General Dther (specify) ► Not Applicable
	(a) SUBTOTAL of Itemized Independent Expenditures		•	0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•	
	(c) TOTAL Independent Expenditures			
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.			
		<i>ically Filed]</i> Date	04 /	D D / Y Y Y Y 11 2016
	Signature			

ITE	EMIZED INDEPENDENT EXPENDITURES					PAGE 42 FOR LINE 24 C	OF 42 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC I	DENTIFICATION	NUMBER 🔻
P	Planned Parenthood Votes				С	C00489799	
Ch	neck if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n	/ D D / Y	YYYY
	Full Name of Payee		🗙 Memo It	em	Date of Publ	ic Distribution/Dis	semination
	Itzamna Translations Company				02	/ D D / Y 17	2016
	Mailing Address P.O. Box 1015				Amount		
	City State		Zip Code				2.59
	Glendale AZ		85311		ransaction II		
	Purpose of Expenditure Translation fee		Category/ Type 004		Date of Disb	Ursement or Oblig	2016
	Name of Federal Candidate		Support	Office S	Sought:	House Dist	trict:
	Hillary Clinton		Oppose	X F	President	Senate St	tate: SC
	Calendar Year-To-Date Per Election for Office Sought	. ,	1168609.16	Disburs 2016	ement For:	Primary Primary pecify) ▶ _ Demod	General General
	Full Name of Payee		🗌 Memo Ite	em	Date of Publ	lic Distribution/Dis	semination
	Mailing Address				Amount		
	City State		Zip Code				
			1		Date of Disb	oursement or Oblig	gation
	Purpose of Expenditure		Category/ Type		M = M	/ D D / Y	Y Y Y Y
	Name of Federal Candidate		Support Oppose		Sought: [President		trict:
	Calendar Year-To-Date Per Election for Office Sought			Disburs	ement For:	Primary	General
	(a) SUBTOTAL of Itemized Independent Expenditures			• •			0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures			•			
	(c) TOTAL Independent Expenditures			•		88	39003.04
	Under penalty of perjury I certify that the independent experient with, or at the request or suggestion of, any candidate or au party committee) any political party committee or its agent.						
	Deirdre Schifeling	Electroni	cally Filed] Date	04	/ D D 11	/ Y Y Y 2016	Y
	Signature				-		