

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Planned Parenthood Votes

ADDRESS (number and street) 123 William St, 10th Floor

Check if different than previously reported. (ACC) New York NY 10038

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00489799

3. IS THIS REPORT NEW (N) OR AMENDED (A) AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
 - Mar 20 (M3)
 - Apr 20 (M4)
 - May 20 (M5)
 - Jun 20 (M6)
 - Jul 20 (M7)
 - Aug 20 (M8)
 - Sep 20 (M9)
 - Oct 20 (M10)
 - Nov 20 (M11) (Non-Election Year Only)
 - Dec 20 (M12) (Non-Election Year Only)
 - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
 - General (12G)
 - Runoff (12R)
 - Convention (12C)
 - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G)
 - Runoff (30R)
 - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 02 / 01 / 2016 through [MM] / [DD] / [YYYY] 02 / 29 / 2016

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

Type or Print Name of Treasurer Liz Gustafson

Signature of Treasurer Liz Gustafson [Electronically Filed] Date 04 / 11 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

| | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Planned Parenthood Votes

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---|---|
| 6. (a) Cash on Hand January 1, <input type="text" value="2016"/> | <input type="text" value=""/> | <input type="text" value="1143446.70"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="1582952.70"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="2738940.93"/> | <input type="text" value="3277526.11"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="4321893.63"/> | <input type="text" value="4420972.81"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="979083.87"/> | <input type="text" value="1078163.05"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="3342809.76"/> | <input type="text" value="3342809.76"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="220838.65"/> | |

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. 06/2004)

Page 3

Write or Type Committee Name

Planned Parenthood Votes

Report Covering the Period: From: / / To: / /

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 2738940.93 | 3277526.11 |
| (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 Totals to Line 33, page 5) | 2738940.93 | 3277526.11 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 2738940.93 | 3277526.11 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 2738940.93 | 3277526.11 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 82632.61 | 86223.79 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 82632.61 | 86223.79 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 889003.04 | 984491.04 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | 7448.22 | 7448.22 |
| 30. 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 With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 979083.87 | 1078163.05 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 979083.87 | 1078163.05 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| 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) | 2738940.93 | 3277526.11 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 2738940.93 | 3277526.11 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 82632.61 | 86223.79 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 82632.61 | 86223.79 |

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 42 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 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)
Planned Parenthood Votes

A. Mr. Jonathan Allan Soros
 Full Name (Last, First, Middle Initial)
 Mailing Address 70A Greenwich Ave PMB 199
 City New York State NY Zip Code 10011-8300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JS Capital Management, LLC Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000000.00**

Date of Receipt **02 / 22 / 2016**
Transaction ID : A2016-427740
 Amount of Each Receipt this Period **1000000.00**
 Memo Item

B. Serena S Connelly
 Full Name (Last, First, Middle Initial)
 Mailing Address 3156 Brookhollow Drive
 City Dallas State TX Zip Code 75234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Contran Corp. Occupation Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **100000.00**

Date of Receipt **02 / 24 / 2016**
Transaction ID : A2016-427741
 Amount of Each Receipt this Period **100000.00**
 Memo Item

C. Ms. Joanne Egerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 77 Westcliff Road
 City Weston State MA Zip Code 02493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400000.00**

Date of Receipt **02 / 09 / 2016**
Transaction ID : A2016-427742
 Amount of Each Receipt this Period **400000.00**
 Memo Item

| | |
|---|-------------------|
| SUBTOTAL of Receipts This Page (optional)..... | 1500000.00 |
| TOTAL This Period (last page this line number only)..... | |

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHZG7 <98I @ `CF`-H9A-N5HCB

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.

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

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

FOR LINE NUMBER: PAGE 8 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)
A. John Henry

Mailing Address 54 Riverside Drive #16-B

City State Zip Code
New York NY 10024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self - Employed Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 02 / 2016
Transaction ID : A2016-427743

Amount of Each Receipt this Period
10000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. David Karp

Mailing Address 35 East 21st Street, #10E

City State Zip Code
New York NY 10010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Tumblr Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2016
Transaction ID : A2016-427744

Amount of Each Receipt this Period
100000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Marie McKellar

Mailing Address PO Box 149

City State Zip Code
Dobbs Ferry NY 10522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2016
Transaction ID : A2016-427745

Amount of Each Receipt this Period
50000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 160000.00

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

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 42 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 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)
Planned Parenthood Votes

A. Ms. Susan P Orr
 Full Name (Last, First, Middle Initial)
 Mailing Address 669 Mirada Avenue
 City State Zip Code
 Stanford CA 94305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Telosa Software Inc. Management
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2016
Transaction ID : A2016-427746
 Amount of Each Receipt this Period
 100000.00
 Memo Item

B. Ms. Julie Packard
 Full Name (Last, First, Middle Initial)
 Mailing Address 6551 Glen Haven Road
 City State Zip Code
 Soquel CA 95073-9779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Monterey Bay Aquarium Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2016
Transaction ID : A2016-427747
 Amount of Each Receipt this Period
 100000.00
 Memo Item

C. Gaye T Pigott
 Full Name (Last, First, Middle Initial)
 Mailing Address 1405 42nd Avenue E
 City State Zip Code
 Seattle WA 98112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Homemaker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2016
Transaction ID : A2016-427748
 Amount of Each Receipt this Period
 250000.00
 Memo Item

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 450000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 42 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 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)
Planned Parenthood Votes

A. Jay Robert Pritzker
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 S Wacker Drive #4000
 City Chicago State IL Zip Code 60606
 FEC ID number of contributing federal political committee. C
 Name of Employer Pritzker Group Occupation Managing Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 500000.00

Date of Receipt 02 / 24 / 2016
Transaction ID : A2016-427749
 Amount of Each Receipt this Period 500000.00
 Memo Item

B. Jon L Stryker
 Full Name (Last, First, Middle Initial)
 Mailing Address 44 W 28th Street
 City New York State NY Zip Code 10001
 FEC ID number of contributing federal political committee. C
 Name of Employer Information Requested Occupation Architect
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 100000.00

Date of Receipt 02 / 16 / 2016
Transaction ID : A2016-427750
 Amount of Each Receipt this Period 100000.00
 Memo Item

C. Planned Parenthood Action Fund
 Full Name (Last, First, Middle Initial)
 Mailing Address 123 William St, 10th Floor
 City New York State NY Zip Code 10038
 FEC ID number of contributing federal political committee. C
 Name of Employer Planned Parenthood Action Fund Occupation N/A
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 16882.35

Date of Receipt 02 / 29 / 2016
Transaction ID : A2016-435319
 Amount of Each Receipt this Period 6321.12
 Memo Item
 In-kind contribution: staff time for accounting and FEC compliance

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 606321.12 |
| TOTAL This Period (last page this line number only)..... | |

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

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

FOR LINE NUMBER: PAGE 11 OF 42
(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 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)
Planned Parenthood Votes

A. Planned Parenthood Action Fund
Full Name (Last, First, Middle Initial)
Mailing Address 123 William St, 10th Floor
City New York State NY Zip Code 10038
FEC ID number of contributing federal political committee. **C**
Name of Employer Planned Parenthood Action Fund Occupation N/A
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **16882.35**

Date of Receipt **02 / 29 / 2016**
Transaction ID : A2016-447203
Amount of Each Receipt this Period **22619.81**
 Memo Item
In-kind contribution: staff time for strategic federal program work

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date

Date of Receipt
Amount of Each Receipt this Period
 Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date

Date of Receipt
Amount of Each Receipt this Period
 Memo Item

| | |
|---|-------------------|
| SUBTOTAL of Receipts This Page (optional)..... | 22619.81 |
| TOTAL This Period (last page this line number only)..... | 2738940.93 |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Hart Research Associates

Mailing Address 1724 Connecticut Avenue NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Polling research

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼ Not Applicable

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 26 | | 2016 |

Transaction ID : B596861

Amount of Each Disbursement this Period

| |
|----------|
| 53685.68 |
|----------|

Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund Inc.

Mailing Address 123 William St, 10th Floor

City New York State NY Zip Code 10038

Purpose of Disbursement
In-kind contribution: staff time for accounting and FEC compliance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼ Not Applicable

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 29 | | 2016 |

Transaction ID : B597009

Amount of Each Disbursement this Period

| |
|---------|
| 6321.12 |
|---------|

Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund Inc.

Mailing Address 123 William St, 10th Floor

City New York State NY Zip Code 10038

Purpose of Disbursement
In-kind contribution: staff time for strategic federal program work

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼ Not Applicable

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 29 | | 2016 |

Transaction ID : B597056

Amount of Each Disbursement this Period

| |
|----------|
| 22619.81 |
|----------|

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

| |
|----------|
| 82626.61 |
|----------|

| |
|--|
| |
|--|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund, Inc.

Mailing Address 123 William St, 10th Floor

City New York State NY Zip Code 10038

Purpose of Disbursement
Payment for staff time for fundraising

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

/ /

Transaction ID : B597054

Amount of Each Disbursement this Period

Memo Item
See corresponding draw down transaction, ID #B597055

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 123 William St, 10th Floor

City New York State NY Zip Code 10038

Purpose of Disbursement
Payment for staff time for fundraising

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

/ /

Transaction ID : B597055

Amount of Each Disbursement this Period

Memo Item
Draw down on advance to Action Fund reported on Line 21b of the 2014 FEC Post-General Rpt

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Votes South Atlantic

Mailing Address 100 S Boylan Ave

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
Local telephone recruitment

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : B596851

Amount of Each Disbursement this Period

7448.22

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7448.22

7448.22

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 15 OF 42 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MackCrouse Group | Nature of Debt (Purpose): Canvass literature |
| Mailing Address 2001 N. Beauregard St. Ste 420 | |
| City State Zip Code Alexandria VA 22311 | |

| | | |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period 3950.00 | Transaction ID : D439020 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 3950.00 |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor 76 Words | Nature of Debt (Purpose): Production of online advertisements. See Schedule E |
| Mailing Address 1806 Vernon St, NW #100 | |
| City State Zip Code Washington DC 20009 | |

| | | |
|--|---------------------------------|---|
| Outstanding Balance Beginning This Period 9274.34 | Transaction ID : D439021 | |
| Amount Incurred This Period 34985.00 | Payment This Period 4000.00 | Outstanding Balance at Close of This Period 40259.34 |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Stones' Phones | Nature of Debt (Purpose): Persuasion phone calls. See Schedule E |
| Mailing Address 41-750 Rancho Las Palmas Dr #E-3 | |
| City State Zip Code Rancho Mirage CA 92270 | |

| | | |
|---|---------------------------------|--|
| Outstanding Balance Beginning This Period 22769.77 | Transaction ID : D439022 | |
| Amount Incurred This Period 147218.48 | Payment This Period 3983.38 | Outstanding Balance at Close of This Period 166004.87 |

| | |
|--|-----------|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | 210214.21 |
| 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) ▶ | |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 16 OF 42 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Blueprint Interactive | Nature of Debt (Purpose): Online advertising. See Schedule E |
| Mailing Address 2229 North Pollard St | |
| City State Zip Code Arlington VA 22207 | |

| | | |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period 0.00 | Transaction ID : D439023 | |
| Amount Incurred This Period 10500.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 10500.00 |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Itzamna Translations Company | Nature of Debt (Purpose): Translation fee. See Schedule E |
| Mailing Address P.O. Box 1015 | |
| City State Zip Code Glendale AZ 85311 | |

| | | |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period 0.00 | Transaction ID : D439024 | |
| Amount Incurred This Period 124.44 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 124.44 |

| | |
|--|---------------------------|
| 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 | Payment This Period | Outstanding Balance at Close of This Period |

| | |
|--|-----------|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | 10624.44 |
| 2) TOTALS This Period (last page this line number only)..... ▶ | 220838.65 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶ | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | 220838.65 |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | |

| | |
|--|--|
| Full Name of Payee Hart Research Associates <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016 |
| Mailing Address 1724 Connecticut Avenue NW | Amount 42.86 |
| City State Zip Code Washington DC 20009 | Transaction ID : B594860 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NV</u> |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u> |
| 1168609.16 | |

| | |
|--|--|
| Full Name of Payee Hart Research Associates <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016 |
| Mailing Address 1724 Connecticut Avenue NW | Amount 42.86 |
| City State Zip Code Washington DC 20009 | Transaction ID : B594861 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 |
| Name of Federal Candidate Ted Cruz | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NV</u> |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Republican Primary</u> |
| 24601.92 | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 85.72 |
| (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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Hart Research Associates
Mailing Address: 1724 Connecticut Avenue NW
City: Washington, State: DC, Zip Code: 20009
Purpose of Expenditure: Persuasion calls, Category/Type: 004
Name of Federal Candidate: Donald Trump, Office Sought: President
Calendar Year-To-Date Per Election for Office Sought: 24601.92
Date of Public Distribution/Dissemination: 02/03/2016
Amount: 42.86
Transaction ID: B594862
Date of Disbursement or Obligation: 02/26/2016
Disbursement For: Primary

Full Name of Payee: Hart Research Associates
Mailing Address: 1724 Connecticut Avenue NW
City: Washington, State: DC, Zip Code: 20009
Purpose of Expenditure: Persuasion calls, Category/Type: 004
Name of Federal Candidate: Marco Rubio, Office Sought: President
Calendar Year-To-Date Per Election for Office Sought: 24601.92
Date of Public Distribution/Dissemination: 02/03/2016
Amount: 42.86
Transaction ID: B594863
Date of Disbursement or Obligation: 02/26/2016
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 85.72
(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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Deirdre Schifeling [Electronically Filed] Date: 04/11/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | |

| | |
|---|--|
| Full Name of Payee Hart Research Associates <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016 |
| Mailing Address 1724 Connecticut Avenue NW | Amount 42.86 |
| City State Zip Code Washington DC 20009 | Transaction ID : B594179 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>SC</u> |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u> |

| | |
|---|--|
| Full Name of Payee Hart Research Associates <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016 |
| Mailing Address 1724 Connecticut Avenue NW | Amount 42.86 |
| City State Zip Code Washington DC 20009 | Transaction ID : B594180 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 |
| Name of Federal Candidate Ted Cruz | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>SC</u> |
| Calendar Year-To-Date Per Election for Office Sought 24601.92 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Republican Primary</u> |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 85.72 |
| (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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | |

| | |
|--|--|
| Full Name of Payee Hart Research Associates <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016 |
| Mailing Address 1724 Connecticut Avenue NW | Amount 42.86 |
| City State Zip Code Washington DC 20009 | Transaction ID : B594181 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 |
| Name of Federal Candidate Donald Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u> |
| Calendar Year-To-Date Per Election for Office Sought 24601.92 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Republican Primary</u> |

| | |
|--|--|
| Full Name of Payee Hart Research Associates <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016 |
| Mailing Address 1724 Connecticut Avenue NW | Amount 42.86 |
| City State Zip Code Washington DC 20009 | Transaction ID : B594182 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 |
| Name of Federal Candidate Marco Rubio <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u> |
| Calendar Year-To-Date Per Election for Office Sought 24601.92 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Republican Primary</u> |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 85.72 |
| (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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
|--|--|

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

| | | | |
|--|--|--|---------------------------------|
| Full Name of Payee Hart Research Associates <input type="checkbox"/> Memo Item | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016 | |
| Mailing Address 1724 Connecticut Avenue NW | | Amount 42.86 | |
| City Washington | State DC | Zip Code 20009 | Transaction ID : B595401 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 | |
| Name of Federal Candidate Hillary Clinton | | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TX | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ Democratic Primary | |
| 1168609.16 | | | |

| | | | |
|--|--|--|---------------------------------|
| Full Name of Payee Hart Research Associates <input type="checkbox"/> Memo Item | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016 | |
| Mailing Address 1724 Connecticut Avenue NW | | Amount 42.86 | |
| City Washington | State DC | Zip Code 20009 | Transaction ID : B595402 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 | |
| Name of Federal Candidate Ted Cruz | | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TX | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ Republican Primary | |
| 24601.92 | | | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 85.72 |
| (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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | |

| | |
|--|--|
| Full Name of Payee Hart Research Associates <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016 |
| Mailing Address 1724 Connecticut Avenue NW | Amount 42.86 |
| City State Zip Code Washington DC 20009 | Transaction ID : B595403 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 |
| Name of Federal Candidate Donald Trump | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TX |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ Republican Primary |
| 24601.92 | |

| | |
|--|--|
| Full Name of Payee Hart Research Associates <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016 |
| Mailing Address 1724 Connecticut Avenue NW | Amount 42.86 |
| City State Zip Code Washington DC 20009 | Transaction ID : B595404 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 |
| Name of Federal Candidate Marco Rubio | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TX |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ Republican Primary |
| 24601.92 | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 85.72 |
| (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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Hart Research Associates
Mailing Address: 1724 Connecticut Avenue NW
City: Washington, State: DC, Zip Code: 20009
Purpose of Expenditure: Persuasion calls, Category/Type: 004
Name of Federal Candidate: Hillary Clinton, Support
Office Sought: President, State: VA
Calendar Year-To-Date Per Election for Office Sought: 1168609.16
Disbursement For: Primary, Democratic Primary
Date of Public Distribution/Dissemination: 02/03/2016
Amount: 42.86
Transaction ID: B595405
Date of Disbursement or Obligation: 02/26/2016

Full Name of Payee: Hart Research Associates
Mailing Address: 1724 Connecticut Avenue NW
City: Washington, State: DC, Zip Code: 20009
Purpose of Expenditure: Persuasion calls, Category/Type: 004
Name of Federal Candidate: Ted Cruz, Oppose
Office Sought: President, State: VA
Calendar Year-To-Date Per Election for Office Sought: 24601.92
Disbursement For: Primary, Republican Primary
Date of Public Distribution/Dissemination: 02/03/2016
Amount: 42.86
Transaction ID: B595406
Date of Disbursement or Obligation: 02/26/2016

(a) SUBTOTAL of Itemized Independent Expenditures: 85.72
(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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Deirdre Schifeling [Electronically Filed] Date: 04/11/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Hart Research Associates
Mailing Address: 1724 Connecticut Avenue NW
City: Washington, State: DC, Zip Code: 20009
Purpose of Expenditure: Persuasion calls, Category/Type: 004
Name of Federal Candidate: Donald Trump, Office Sought: President
Calendar Year-To-Date Per Election for Office Sought: 24601.92
Date of Public Distribution/Dissemination: 02/03/2016
Amount: 42.86
Transaction ID: B595407
Date of Disbursement or Obligation: 02/26/2016
Disbursement For: Primary, Republican Primary

Full Name of Payee: Hart Research Associates
Mailing Address: 1724 Connecticut Avenue NW
City: Washington, State: DC, Zip Code: 20009
Purpose of Expenditure: Persuasion calls, Category/Type: 004
Name of Federal Candidate: Marco Rubio, Office Sought: President
Calendar Year-To-Date Per Election for Office Sought: 24601.92
Date of Public Distribution/Dissemination: 02/03/2016
Amount: 42.86
Transaction ID: B595408
Date of Disbursement or Obligation: 02/26/2016
Disbursement For: Primary, Republican Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 85.72
(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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Deirdre Schifeling [Electronically Filed] Date 04/11/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Hart Research Associates
Mailing Address: 1724 Connecticut Avenue NW
City: Washington, State: DC, Zip Code: 20009
Purpose of Expenditure: Persuasion calls, Category/Type: 004
Name of Federal Candidate: Hillary Clinton, Support/Oppose: Support, Office Sought: President, State: MI
Calendar Year-To-Date Per Election for Office Sought: 1168609.16
Disbursement For: Primary, Democratic Primary

Full Name of Payee: Hart Research Associates
Mailing Address: 1724 Connecticut Avenue NW
City: Washington, State: DC, Zip Code: 20009
Purpose of Expenditure: Persuasion calls, Category/Type: 004
Name of Federal Candidate: Ted Cruz, Support/Oppose: Oppose, Office Sought: President, State: MI
Calendar Year-To-Date Per Election for Office Sought: 24601.92
Disbursement For: Primary, Republican Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 85.72
(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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Deirdre Schifeling [Electronically Filed] Date 04/11/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | |

| | |
|--|--|
| Full Name of Payee Hart Research Associates <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016 |
| Mailing Address 1724 Connecticut Avenue NW | Amount 42.86 |
| City State Zip Code Washington DC 20009 | Transaction ID : B595411 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 |
| Name of Federal Candidate Donald Trump | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u> |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Republican Primary</u> |
| 24601.92 | |

| | |
|--|--|
| Full Name of Payee Hart Research Associates <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016 |
| Mailing Address 1724 Connecticut Avenue NW | Amount 42.86 |
| City State Zip Code Washington DC 20009 | Transaction ID : B595412 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 |
| Name of Federal Candidate Marco Rubio | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u> |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Republican Primary</u> |
| 24601.92 | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 85.72 |
| (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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y | |

| | |
|--|---|
| Full Name of Payee 76 Words <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 21 / 2016 |
| Mailing Address 1806 Vernon St, NW #100 | Amount 4000.00 |
| City State Zip Code Washington DC 20009 | Transaction ID : B592913 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 02 / 08 / 2016 |
| Purpose of Expenditure Payment for IE originally reported on 2016 FEC February Monthly Report. See Schedule D | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u> |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u> |

| | |
|--|---|
| Full Name of Payee Planned Parenthood Votes South Atlantic <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 02 / 09 / 2016 |
| Mailing Address 100 S Boylan Ave | Amount 25695.33 |
| City State Zip Code Raleigh NC 27603 | Transaction ID : B594184 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 02 / 22 / 2016 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u> |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u> |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 29695.33 |
| (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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | |

| | |
|---|--|
| Full Name of Payee Planned Parenthood Votes South Atlantic <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 09 / 2016 |
| Mailing Address 100 S Boylan Ave | Amount 9906.75 |
| City State Zip Code Raleigh NC 27603 | Transaction ID : B594185 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 22 / 2016 |
| Purpose of Expenditure Persuasion canvasses | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>SC</u> |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u> |
| 1168609.16 | |

| | |
|---|--|
| Full Name of Payee Planned Parenthood Votes South Atlantic <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 09 / 2016 |
| Mailing Address 100 S Boylan Ave | Amount 6604.50 |
| City State Zip Code Raleigh NC 27603 | Transaction ID : B594186 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 22 / 2016 |
| Purpose of Expenditure Volunteer recruitment | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>SC</u> |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u> |
| 1168609.16 | |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 16511.25 |
| (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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Stones' Phones
Mailing Address: 41-750 Rancho Las Palmas Dr #E-3
City: Rancho Mirage, State: CA, Zip Code: 92270
Purpose of Expenditure: Partial payment for IE originally reported on 2016 FEC February Monthly Report. See Schedule D
Category/Type: 004
Date of Public Distribution/Dissemination: 01/27/2016
Amount: 3983.38
Transaction ID: B597013
Date of Disbursement or Obligation: 02/16/2016
Name of Federal Candidate: Hillary Clinton
Support: [X]
Office Sought: [X] President
Disbursement For: [X] Primary
Calendar Year-To-Date Per Election for Office Sought: 1168609.16

Full Name of Payee: Screen Strategies Media
Mailing Address: 11150 Fairfax Blvd, Ste 550
City: Fairfax, State: VA, Zip Code: 22030
Purpose of Expenditure: TV, Cable media buy
Category/Type: 004
Date of Public Distribution/Dissemination: 02/17/2016
Amount: 19995.00
Transaction ID: B594864
Date of Disbursement or Obligation: 02/16/2016
Name of Federal Candidate: Hillary Clinton
Support: [X]
Office Sought: [X] President
Disbursement For: [X] Primary
Calendar Year-To-Date Per Election for Office Sought: 1168609.16

(a) SUBTOTAL of Itemized Independent Expenditures: 203978.38
(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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Deirdre Schifeling
[Electronically Filed]
Date: 04/11/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | |

| | |
|--|---|
| Full Name of Payee 76 Words <input checked="" type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Mailing Address 1806 Vernon St, NW #100 | Amount 2000.00 |
| City Washington State DC Zip Code 20009 | Transaction ID : B594865 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y |
| Purpose of Expenditure Production of TV, cable, online ads. See Schedule D | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u> |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u> |

| | |
|--|--|
| Full Name of Payee Blueprint Interactive <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Mailing Address 2229 North Pollard St | Amount 44798.19 |
| City Arlington State VA Zip Code 22207 | Transaction ID : B594866 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 16 / 2016 |
| Purpose of Expenditure Online ad buy | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u> |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u> |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 44798.19 |
| (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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | |

| | |
|--|--|
| Full Name of Payee Stones' Phones <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Mailing Address 41-750 Rancho Las Palmas Dr #E-3 | Amount 20567.57 |
| City State Zip Code Rancho Mirage CA 92270 | Transaction ID : B594867 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 |
| Purpose of Expenditure Persuasion calls | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NV</u> |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u> |
| 1168609.16 | |

| | |
|---|--|
| Full Name of Payee Planned Parenthood of NYC Action Fund <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 19 / 2016 |
| Mailing Address 26 Bleecker St | Amount 5000.00 |
| City State Zip Code New York NY 10012 | Transaction ID : B594869 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 22 / 2016 |
| Purpose of Expenditure Travel costs for volunteers | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>SC</u> |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u> |
| 1168609.16 | |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 25567.57 |
| (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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y | |

| | |
|--|---|
| Full Name of Payee Blueprint Interactive <input checked="" type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 02 / 24 / 2016 |
| Mailing Address 2229 North Pollard St | Amount 308990.00 |
| City State Zip Code Arlington VA 22207 | Transaction ID : B595395 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y |
| Purpose of Expenditure Online advertising (media buy). See transaction B596857 and Schedule D | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TX |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ Democratic Primary |

| | |
|--|---|
| Full Name of Payee Blueprint Interactive <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 02 / 24 / 2016 |
| Mailing Address 2229 North Pollard St | Amount 303298.46 |
| City State Zip Code Arlington VA 22207 | Transaction ID : B596857 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y |
| Purpose of Expenditure Online advertising (media buy). Partial payment for transaction B595395 | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TX |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ Democratic Primary |

| | |
|--|------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 303298.46 |
| (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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date **04 / 11 / 2016**

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|---|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY | |

| | |
|--|--|
| Full Name of Payee Blueprint Interactive <input checked="" type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 24 / 2016 |
| Mailing Address 2229 North Pollard St | Amount 125519.00 |
| City State Zip Code Arlington VA 22207 | Transaction ID : B595396 |
| Purpose of Expenditure Online advertising (media buy). See transaction B596858 and Schedule D | Date of Disbursement or Obligation MM / DD / YYYY |
| Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MI |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ Democratic Primary |

| | |
|--|--|
| Full Name of Payee Blueprint Interactive <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 24 / 2016 |
| Mailing Address 2229 North Pollard St | Amount 123206.94 |
| City State Zip Code Arlington VA 22207 | Transaction ID : B596858 |
| Purpose of Expenditure Online advertising (media buy). Partial payment for transaction B595396 | Date of Disbursement or Obligation MM / DD / YYYY 02 / 23 / 2016 |
| Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MI |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> 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 expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date MM / DD / YYYY
04 / 11 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Blueprint Interactive
Mailing Address: 2229 North Pollard St
City: Arlington, State: VA, Zip Code: 22207
Purpose of Expenditure: Online advertising (media buy). See transaction B596859 and Schedule D
Category/Type: 004
Name of Federal Candidate: Hillary Clinton
Office Sought: President
Disbursement For: Primary
Amount: 13529.00
Transaction ID: B595397
Date of Disbursement or Obligation: 02/24/2016

Full Name of Payee: Blueprint Interactive
Mailing Address: 2229 North Pollard St
City: Arlington, State: VA, Zip Code: 22207
Purpose of Expenditure: Online advertising (media buy). Partial payment for transaction B595397
Category/Type: 004
Name of Federal Candidate: Hillary Clinton
Office Sought: President
Disbursement For: Primary
Amount: 133032.60
Transaction ID: B596859
Date of Disbursement or Obligation: 02/23/2016

(a) SUBTOTAL of Itemized Independent Expenditures: 133032.60
(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 cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Deirdre Schifeling
[Electronically Filed]
Date: 04/11/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
|--|--|

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

| | | |
|--|--|---|
| Full Name of Payee 76 Words | <input checked="" type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 24 / 2016 |
| Mailing Address 1806 Vernon St, NW #100 | | Amount 8122.64 |
| City Washington | State DC | Zip Code 20009 |
| Purpose of Expenditure Production of online ads. See Schedule D | Category/Type 004 | Transaction ID : B595398 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y |
| Name of Federal Candidate Hillary Clinton | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TX |
| Calendar Year-To-Date Per Election for Office Sought | 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u> |

| | | |
|--|--|---|
| Full Name of Payee 76 Words | <input checked="" type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 24 / 2016 |
| Mailing Address 1806 Vernon St, NW #100 | | Amount 3299.61 |
| City Washington | State DC | Zip Code 20009 |
| Purpose of Expenditure Production of online ads. See Schedule D | Category/Type 004 | Transaction ID : B595399 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y |
| Name of Federal Candidate Hillary Clinton | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MI |
| Calendar Year-To-Date Per Election for Office Sought | 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u> |

| | |
|--|--|
| (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 reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y | |

| | |
|--|--|
| Full Name of Payee 76 Words <input checked="" type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 02 / 24 / 2016 |
| Mailing Address 1806 Vernon St, NW #100 | Amount 3562.75 |
| City State Zip Code Washington DC 20009 | Transaction ID : B595400 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y |
| Purpose of Expenditure Production of online ads. See Schedule D | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: VA |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ Democratic Primary |

| | |
|--|--|
| Full Name of Payee Stones' Phones <input checked="" type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 02 / 26 / 2016 |
| Mailing Address 41-750 Rancho Las Palmas Dr #E-3 | Amount 22551.31 |
| City State Zip Code Rancho Mirage CA 92270 | Transaction ID : B595414 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y |
| Purpose of Expenditure Persuasion calls. See Schedule D(Amendment to earlier estimate) | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MI |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> 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 expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
|--|--|

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

| | | | |
|---|-------------|--|--|
| Full Name of Payee Stones' Phones <input checked="" type="checkbox"/> Memo Item | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 | |
| Mailing Address 41-750 Rancho Las Palmas Dr #E-3 | | Amount 105298.62 | |
| City Rancho Mirage | State CA | Zip Code 92270 | Transaction ID : B595415 |
| Purpose of Expenditure Persuasion calls. See Schedule D(Amendment to earlier estimate) | | Category/Type 004 | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y |
| Name of Federal Candidate Hillary Clinton | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TX |
| Calendar Year-To-Date Per Election for Office Sought | | 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ Democratic Primary |

| | | | |
|--|-------------|--|--|
| Full Name of Payee Stones' Phones <input checked="" type="checkbox"/> Memo Item | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 | |
| Mailing Address 41-750 Rancho Las Palmas Dr #E-3 | | Amount 19368.55 | |
| City Rancho Mirage | State CA | Zip Code 92270 | Transaction ID : B595416 |
| Purpose of Expenditure Persuasion calls. See Schedule D (Amendment to earlier estimate) | | Category/Type 004 | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y |
| Name of Federal Candidate Hillary Clinton | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: VA |
| Calendar Year-To-Date Per Election for Office Sought | | 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> 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 expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | |

| | |
|---|--|
| Full Name of Payee Hart Research Associates <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 03 / 2016 |
| Mailing Address 1724 Connecticut Avenue NW | Amount 8057.12 |
| City State Zip Code Washington DC 20009 | Transaction ID : B597066 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 |
| Purpose of Expenditure Payment for nationwide unitemized independent expenditures. See text explanation on page 39 | Category/Type 004 |
| Name of Federal Candidate Nationwide Unitemized <input type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u> |
| Calendar Year-To-Date Per Election for Office Sought 8168.61 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Not Applicable</u> |

| | |
|--|--|
| Full Name of Payee Itzamna Translations Company <input checked="" type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Mailing Address P.O. Box 1015 | Amount 2.59 |
| City State Zip Code Glendale AZ 85311 | Transaction ID : B598485 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Purpose of Expenditure Translation fee | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u> |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u> |

| | |
|--|---|
| (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 made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`#H9A-N5HCB

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 unitemized independent expenditure allocation in the states where the committee did not trigger 24- or 48-hour reporting requirements

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | |

| | |
|--|--|
| Full Name of Payee Itzamna Translations Company <input checked="" type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Mailing Address P.O. Box 1015 | Amount 2.59 |
| City State Zip Code Glendale AZ 85311 | Transaction ID : B598486 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Purpose of Expenditure Translation fee Category/Type 004 | Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TX |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ Democratic Primary |

| | |
|--|--|
| Full Name of Payee Itzamna Translations Company <input checked="" type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Mailing Address P.O. Box 1015 | Amount 2.59 |
| City State Zip Code Glendale AZ 85311 | Transaction ID : B598487 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Purpose of Expenditure Translation fee Category/Type 004 | Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MI |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> 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 expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y | |

| | |
|---|--|
| Full Name of Payee Itzamna Translations Company <input checked="" type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Mailing Address P.O. Box 1015 | Amount 2.59 |
| City State Zip Code Glendale AZ 85311 | Transaction ID : B598488 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Purpose of Expenditure Translation fee | Category/Type 004 |
| Name of Federal Candidate Hillary Clinton | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: VA |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ Democratic Primary |
| 1168609.16 | |

| | |
|--|--|
| Full Name of Payee Itzamna Translations Company <input checked="" type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Mailing Address P.O. Box 1015 | Amount 111.49 |
| City State Zip Code Glendale AZ 85311 | Transaction ID : B598489 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Purpose of Expenditure Unitemized nationwide independent expenditures. See text explanation on page 39. | Category/Type 004 |
| Name of Federal Candidate Nationwide Unitemized | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Not Applicable |
| 8168.61 | |

| | |
|--|--|
| (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 reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Planned Parenthood Votes | FEC IDENTIFICATION NUMBER ▼ C C00489799 |
|--|--|

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

| | |
|--|--|
| Full Name of Payee Itzamna Translations Company <input checked="" type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Mailing Address P.O. Box 1015 | Amount 2.59 |
| City State Zip Code Glendale AZ 85311 | Transaction ID : B598490 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 17 / 2016 |
| Purpose of Expenditure Translation fee Category/Type 004 | Name of Federal Candidate Hillary Clinton <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC |
| Calendar Year-To-Date Per Election for Office Sought 1168609.16 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ Democratic Primary |

| | |
|--|---|
| Full Name of Payee <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y |
| Mailing Address | Amount |
| City State Zip Code | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y |
| Purpose of Expenditure Category/Type | Name of Federal Candidate <input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 0.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | 889003.04 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature