

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

Office Use Only

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

12FE4M5

Planned Parenthood Action Fund Inc. PAC

ADDRESS (number and street) ▼

434 West 33rd Street

☐ Check if different than previously reported. (ACC)

New York

NY

10001

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00314617

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☒ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
08 01 2015

through

M M M / D D D / Y Y Y Y Y Y
08 31 2015

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

M M M / D D D / Y Y Y Y Y Y
09 18 2015

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**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Planned Parenthood Action Fund Inc. PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
08 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
08 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		412327.92
(b) Cash on Hand at Beginning of Reporting Period.....	507889.12	
(c) Total Receipts (from Line 19)	3182.20	202002.81
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	511071.32	614330.73
7. Total Disbursements (from Line 31)	10197.20	113456.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	500874.12	500874.12
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ 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 Action Fund Inc. PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
08	/	01	/	2015

To:

M M	/	D D	/	Y Y Y Y Y Y
08	/	31	/	2015

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).....

2500.00

194740.00

(ii) Unitemized

485.00

5076.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

2985.00

199816.00

(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)

2985.00

199816.00

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).....

197.20

2186.81

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))..... ▶

3182.20

202002.81

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

3182.20

202002.81

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	197.20	73274.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	197.20	73274.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	40182.43
24. Independent Expenditures (use Schedule E)	0.00	0.00
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	0.00	0.00
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)) ..	10197.20	113456.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10197.20	113456.61

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)	2985.00	199816.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2985.00	199816.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	197.20	73274.18
37. Offsets to Operating Expenditures (from Line 15, page 3).....	197.20	2186.81
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	71087.37

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

PAGE 6 OF 10

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial)

A. Ms. Wendy MacKenzie

Mailing Address 829 Park Avenue

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self - Employed

Occupation

Consultant

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Transaction ID : A2015-2076438

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

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

2500.00

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

2500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 10
(check only one)

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

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NAME OF COMMITTEE (In Full)

Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund Inc.

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

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

Aggregate Year-to-Date ▼

1142.81

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		19		2015

Transaction ID : A2015-14347

Amount of Each Receipt this Period

197.20

Reimbursement of merchant fees

Full Name (Last, First, Middle Initial)

B.

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

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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

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

Amount of Each Receipt this Period

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

197.20

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

197.20

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

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial)

A. CitiBank F.S.B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2015

Mailing Address P.O. Box 19748

City	State	Zip Code
Washington	DC	20036

Transaction ID : B582958Purpose of Disbursement
Merchant fee

001

Amount of Each Disbursement this Period

Candidate Name

153.20

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Full Name (Last, First, Middle Initial)

B. Mastercard/Visa

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2015

Mailing Address PO Box 200

City	State	Zip Code
Wilson	NC	27894

Transaction ID : B582959Purpose of Disbursement
Merchant fee

001

Amount of Each Disbursement this Period

Candidate Name

44.00

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

--

Candidate Name

--

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

197.20

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

197.20

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

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☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial)

A. Bennet for Colorado

Mailing Address PO Box 3078

City	State	Zip Code
Denver	CO	80201

Purpose of Disbursement
Contribution

Candidate Name

Michael Bennet

Office Sought:	☐ House
	☒ Senate
	☐ President

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : B579346

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Missourians for Kander

Mailing Address PO Box 548

City	State	Zip Code
Columbia	MO	65205

Purpose of Disbursement
Contribution

Candidate Name

Jason Kander

Office Sought:	☐ House
	☒ Senate
	☐ President

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : B579349

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Flores for Congress

Mailing Address 420 N. Nellis Blvd. Suite A3-87

City	State	Zip Code
Las Vegas	NV	89110

Purpose of Disbursement
Contribution

Candidate Name

Lucy Flores

Office Sought:	☒ House
	☐ Senate
	☐ President

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : B579347

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

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

PAGE 10 OF 10

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial)

A. Catherine Cortez-Masto for Senate

Mailing Address 8020 South Rainbow Blvd #100-112

City	State	Zip Code
Las Vegas	NV	89139

Purpose of Disbursement
Contribution

Candidate Name

Kari L. Riley

Office Sought:	☐ House
	☒ Senate
	☐ President

State: NV District:

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : B579348

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

10000.00
