

PLANNED PARENTHOOD PENNSYLVANIA ADVOCA

1514 N 2ND ST

HARRISBURG

PA

17102

FEC ID No. C90004946

☒ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 2

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
PLANNED PARENTHOOD PENNSYLVANIA ADVOCA

FEC IDENTIFICATION NUMBER

C C90004946

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

PLANNED PARENTHOOD PA ADVOCATES

Date

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

Amount

342.44

City

HARRISBURG

State

PA

Zip Code

17102

Purpose of Expenditure

STAFF EXPENSES

Category/
Type

Office Sought:

☐ House

State: PA

☒ Senate

District: 00

☐ Presidential

Check One:

☒ Support☐ Oppose

Name of Federal Candidate supported or Opposed by expenditure:

JOE SESTAK

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: SE.000001

Calendar Year-To-Date Per Election

.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

PLANNED PARENTHOOD PA ADVOCATES

Date

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

Amount

1.50

City

HARRISBURG

State

PA

Zip Code

17102

Purpose of Expenditure

PRINTING

Category/
Type

Office Sought:

☐ House

State: PA

☒ Senate

District: 00

☐ Presidential

Check One:

☒ Support☐ Oppose

Name of Federal Candidate supported or Opposed by expenditure:

JOE SESTAK

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: SE.000002

Calendar Year-To-Date Per Election

.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

343.94

(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.

ANNE LAIRD

Signature

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 2 / 2

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
PLANNED PARENTHOOD PENNSYLVANIA ADVOCA

FEC IDENTIFICATION NUMBER

C C90004946

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

PLANNED PARENTHOOD PA ADVOCATES

Date

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

Amount

619.21

Mailing Address

1514 N 2ND STREET

City

HARRISBURG

State

PA

Zip Code

17102

Purpose of Expenditure

PHONE BANK MINUTES

Category/
Type

Office Sought:

☐ House

State: PA

☒ Senate

District: 00

☐ Presidential

Check One:

☒ Support☐ Oppose

Name of Federal Candidate supported or Opposed by expenditure:

JOE SESTAK

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: SE.000003

Calendar Year-To-Date Per Election

.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

PLANNED PARENTHOOD PA ADVOCATES

Date

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

Amount

2132.00

Mailing Address

1514 N 2ND STREET

City

HARRISBURG

State

PA

Zip Code

17102

Purpose of Expenditure

PAID PHONE CALLS

Category/
Type

Office Sought:

☐ House

State: PA

☒ Senate

District: 00

☐ Presidential

Check One:

☒ Support☐ Oppose

Name of Federal Candidate supported or Opposed by expenditure:

JOE SESTAK

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: SE.000004

Calendar Year-To-Date Per Election

.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

2751.21

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

3095.15

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.

ANNE LAIRD

Signature

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0