

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation NARAL Pro-Choice America		3. FEC Identification Number C C90004185
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1150 15th Street, NW		
(c) City, State and ZIP Code Washington DC 20005		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year-End Report

24-Hour Report
 48-Hour Report

b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

/ /

THROUGH

/ /

6. TOTAL CONTRIBUTIONS

7. 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 any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Kimberly Robinson	<i>Kimberly Robinson</i>	04/09/2013

[Electronically Filed]

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

For further information, contact:
Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F5N
Transaction ID :

48-hour reported expenditures are estimated amounts

Form/Schedule:
Transaction ID:

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
NARAL Pro-Choice America

Full Name (Last, First, Middle Initial) of Payee NARAL Pro-Choice Foundation		Date MM / DD / YYYY 04 / 03 / 2013
Mailing Address 1156 15th St NW Ste 700		Amount 20.75 Transaction ID : VN7C28ECQ6
City Washington	State DC	
Purpose of Expenditure List rental	Category/ Type	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ed Markey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 40700.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special Primary

Full Name (Last, First, Middle Initial) of Payee NARAL Pro-Choice Foundation		Date MM / DD / YYYY 04 / 08 / 2013
Mailing Address 1156 15th St NW Ste 700		Amount 167.75 Transaction ID : VN7C29H7147
City Washington	State DC	
Purpose of Expenditure List rental	Category/ Type	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ed Markey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 40700.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special Primary

Full Name (Last, First, Middle Initial) of Payee NARAL Pro-Choice Foundation		Date MM / DD / YYYY 04 / 09 / 2013
Mailing Address 1156 15th St NW Ste 700		Amount 10.37 Transaction ID : VN7C29H7154
City Washington	State DC	
Purpose of Expenditure List rental	Category/ Type	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ed Markey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 40700.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special Primary

(a) SUBTOTAL of Itemized Independent Expenditures.....	198.87
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
NARAL Pro-Choice America

Full Name (Last, First, Middle Initial) of Payee NARAL Pro-Choice Foundation		Date MM / DD / YYYY 04 / 09 / 2013
Mailing Address 1156 15th St NW Ste 700		Amount 10.38 Transaction ID : VN7C29H7162
City Washington	State DC	
Zip Code 20005-1727		
Purpose of Expenditure List rental	Category/ Type	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Stephen F Lynch		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 40700.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special Primary

Full Name (Last, First, Middle Initial) of Payee XO Communications		Date MM / DD / YYYY 04 / 02 / 2013
Mailing Address 8851 S Sandy Pkwy		Amount 51.60 Transaction ID : VN7C28ECR4
City Sandy	State UT	
Zip Code 84070-6408		
Purpose of Expenditure Telemarketing	Category/ Type	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ed Markey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 40700.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special Primary

Full Name (Last, First, Middle Initial) of Payee XO Communications		Date MM / DD / YYYY 04 / 03 / 2013
Mailing Address 8851 S Sandy Pkwy		Amount 41.70 Transaction ID : VN7C28EDR5
City Sandy	State UT	
Zip Code 84070-6408		
Purpose of Expenditure Telemarketing	Category/ Type	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ed Markey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 40700.32		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special Primary

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	103.68
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	302.55
(carry total from last page forward to Line 7)		