

24 Haw filing

Planned Parenthood Hudson
ReConic Action Fund

90008236

60 pages

P.02

66%

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation Planned Parenthood Hudson Peconic Action Fund	
(b) Address (number and street) 4 skyline Drive	<input type="checkbox"/> check if different than previously reported
(c) City, State and ZIP Code Hawthorne NY 10532	3. FEC Identification Number C90008236
2. Occupation and Name of Employer (for Individual Filers Only)	

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? ☒ No ☐ Yes, it amends the report filed on

5. COVERING PERIOD:

FROM

MM	DD	YY
----	----	----

THROUGH

MM	DD	YY
----	----	----

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.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Alyssa J. Miller**11/7/16**

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 18 U.S.C. § 30109.

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-8530, Local 202-694-1100

SCHEDULE 5-E**ITEMIZED INDEPENDENT EXPENDITURES**PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Planned Parenthood Hudson Peconic Action Fund

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

Red Horse Strategies

Date of Public Distribution/Dissemination

10/18/2016

Mailing Address

55 Washington Street #624

Amount

City

Brooklyn

State

NY

Zip Code

11201

2,222.00

Purpose of Expenditure

Online Ad

Category/
Type

004

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Donald Trump

Calendar Year-To-Date Per Election
for Office Sought

2,222.00

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____

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

Date of Public Distribution/Dissemination

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary☐ General☐ Other (specify) _____

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

Date of Public Distribution/Dissemination

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary☐ General☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

2,222.00

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....

(carry total from last page forward to Line 7)

2,222.00

Via FAX

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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N/A PREPARER <i>MP</i>	<i>11/7/2016</i> N/A DATE PREPARED

(8/2013)