

RECEIVED

2011 FEB -1 AM 10:07

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 Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo Counties		3. FEC Identification Number C C90006701
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 518 Garden Street		
(c) City, State and ZIP Code Santa Barbara, CA 93101		
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

10 01 2010
THROUGH
12 31 2010

6. TOTAL CONTRIBUTIONS 0.00

7. TOTAL INDEPENDENT EXPENDITURES 308.16

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
CHERYL Rollings		1/27/11

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

11030562296

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo Counties

Full Name (Last, First, Middle Initial) of Payee San Luis Obispo New Times		Date MM / DD / YY 10 / 07 / 2010
Mailing Address 1010 Marsh Street City State Zip Code San Luis Obispo, CA 93401		Amount 26.46
Purpose of Expenditure Newspaper Ads	Category/Type 004	Office Sought: <input type="checkbox"/> House State: CA <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barbara Boxer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1,009.79		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 10 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee San Luis Obispo New Times		Date MM / DD / YY 10 / 07 / 2010
Mailing Address 1010 Marsh Street City State Zip Code San Luis Obispo, CA 93401		Amount 26.46
Purpose of Expenditure Newspaper Ads	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Lois Cappa		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 891.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 10 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Santa Barbara Independent Inc.		Date MM / DD / YY 10 / 07 / 2010
Mailing Address 122 W. Figueroa City State Zip Code Santa Barbara, CA 93101		Amount 32.60
Purpose of Expenditure Newspaper Ads	Category/Type 004	Office Sought: <input type="checkbox"/> House State: CA <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barbara Boxer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1,009.79		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 10 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures	85.52
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	

11030562297

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo Counties

Full Name (Last, First, Middle Initial) of Payee Santa Barbara Independent Inc.	Date MM / DD / YYYY 10 / 07 / 2010
Mailing Address 122 W. Figueroa	Amount 32.60
City State Zip Code Santa Barbara, CA 93101	

Purpose of Expenditure Newspaper Ads	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Lois Capps		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 891.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 10 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Santa Barbara Independent Inc.	Date MM / DD / YYYY 10 / 07 / 2010
Mailing Address 122 W. Figueroa	Amount 32.60
City State Zip Code Santa Barbara, CA 93101	

Purpose of Expenditure Newspaper Ads	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input checked="" type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tim Allison		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 92.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 10 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Santa Maria Sun	Date MM / DD / YYYY 10 / 07 / 2010
Mailing Address 3130 Skyway Drive, Suite 603	Amount 12.34
City State Zip Code Santa Maria, CA 93455	

Purpose of Expenditure Newspaper Ads	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: CA <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barbara Boxer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1,009.79		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 10 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures	77.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	

11030562298

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo Counties

Full Name (Last, First, Middle Initial) of Payee Santa Maria Sun		Date 10 07 2010
Mailing Address 3130 Skyway Drive, Suite 603		Amount 12.34
City Santa Maria	State CA	
Zip Code 93455		
Purpose of Expenditure Newspaper Ads	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Lois Cappe		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 891.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 10 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Santa Maria Sun		Date 10 07 2010
Mailing Address 3130 Skyway Drive, Suite 603		Amount 12.34
City Santa Maria	State CA	
Zip Code 93455		
Purpose of Expenditure Newspaper Ads	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tim Allison		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 92.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 10 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Ventura County Reporter		Date 10 07 2010
Mailing Address 4840 Market Street, Suite D		Amount 40.14
City Ventura	State CA	
Zip Code 93003		
Purpose of Expenditure Newspaper Ads	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: CA <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barbara Boxer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1,009.79		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 10 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures	64.82
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	

11030562299

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (in Full)
Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo Counties

Full Name (Last, First, Middle Initial) of Payee Ventura County Reporter		Date MM / DD / YY V V 10 / 07 / 2010
Mailing Address 4840 Market Street, Suite D		Amount 40.14
City Ventura	State CA	
Zip Code 93003		
Purpose of Expenditure Newspaper Ads	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Lois Capps		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 891.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 10 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Ventura County Reporter		Date MM / DD / YY V V 10 / 07 / 2010
Mailing Address 4840 Market Street, Suite D		Amount 40.14
City Ventura	State CA	
Zip Code 93003		
Purpose of Expenditure Newspaper Ads	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tim Allison		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 92.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 10 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State	
Zip Code		
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
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	80.28
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	308.16

11030562300

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *LPS* Shipping Date
1/31/11
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

JML
 PREPARER
 (3/2005)

2/1/11
 DATE PREPARED

11030562301