

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 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. 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 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on / /

5. COVERING PERIOD:

FROM / /

THROUGH / /

6. TOTAL CONTRIBUTIONS..... 0.00

7. TOTAL INDEPENDENT EXPENDITURES 6219.25

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
Kimberly Robinson	<i>Kimberly Robinson</i>	07/15/2014

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Moxie Media		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 09 / 2014	
Mailing Address PO Box 30084		Amount 2000.00	
City Seattle	State WA	Zip Code 98113-2084	
Transaction ID : VN7C29SBQ94			
Purpose of Expenditure Printing, postage, mailhouse	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Brendan Boyle		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6000.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moxie Media		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 12 / 2014	
Mailing Address PO Box 30084		Amount 2000.00	
City Seattle	State WA	Zip Code 98113-2084	
Transaction ID : VN7C29SBQ36			
Purpose of Expenditure Web advertising	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Brendan Boyle		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6000.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moxie Media		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2014	
Mailing Address PO Box 30084		Amount 2000.00	
City Seattle	State WA	Zip Code 98113-2084	
Transaction ID : VN7C29SCGC0			
Purpose of Expenditure Printing, postage, mailhouse	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Brendan Boyle		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6000.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	6000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	6000.00