

90° D

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**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 <b>Planned Parenthood Hudson Pconic Action Fund</b>		3. FEC Identification Number <b>C90008236</b>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported <b>4 skyline Drive</b>		
(c) City, State and ZIP Code <b>Hawthorne NY 10532</b>		
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 Reportb) Is this Report an amendment? ☒ No☐ Yes, It amends the report filed on

## 5. COVERING PERIOD:

FROM

THROUGH

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES .....

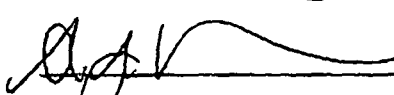
**2,222.00**

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 52 U.S.C. §30109.

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

P.07

96%

PAGE	OF
FOR LINE 7 OF FORM 5	

# **SCHEDULE 5-E** **ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

Planned Parenthood Hudson Piconic Action Fund

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

Red Horse Strategies

Mailing Address

55 Washington Street #624

City

Brooklyn

State

NY

Zip Code

11201

Date of Public Distribution/Dissemination

10/27/2016

Amount

2,222.00

Purpose of Expenditure

Mailing

Category/  
Type

006

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Donald J. Trump

Calendar Year-To-Date Per Election  
for Office Sought

6,666.00

Disbursement For:

☐ Primary☒ General☐ Other (specify) \_\_\_\_\_

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

Mailing Address

City

State

Zip Code

Date of Public Distribution/Dissemination

Amount

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

Mailing Address

City

State

Zip Code

Date of Public Distribution/Dissemination

Amount

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.

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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<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
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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)