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

(b) Address (number and street) ☐ check if different than previously reported

815 16TH STREET NW

(c) City, State and ZIP Code

WASHINGTON DC 20006

3. FEC Identification Number

C C90004185

2. **Corporate filers only** Is the filer a qualified nonprofit corporation? ☒ Yes ☐ 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

M M / D D / Y Y Y Y

04 / 20 / 2012

THROUGH

04 / 24 / 2012

6. TOTAL CONTRIBUTIONS 0

7. TOTAL INDEPENDENT EXPENDITURES 7623

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 Kimberly Robinson

SIGNATURE *[Electronically Filed]* *Kimberly Robinson*

DATE 04/24/2012

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

Image# 12951577319

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Mailing Address PO Box 39000

City State Zip Code
San Francisco CA 94139-3181

Date 04 / 24 / 2012

Amount 190

Transaction ID : D1764

Purpose of Expenditure
Online advertising

Category/ Type

Office Sought: [ ] House [ ] Senate [X] President State: DC District: 00

Name of Federal Candidate Supported or Opposed by Expenditure:
Mitt Romney

Check One: [ ] Support [X] Oppose

Calendar Year-To-Date Per Election for Office Sought 302352.08

Disbursement For: [ ] Primary [X] General 2012 [ ] Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee
NARAL Pro-Choice Foundation

Mailing Address 1156 15th Street,NW

City State Zip Code
Washington DC 20005

Date 04 / 24 / 2012

Amount 7433

Transaction ID : D1765

Purpose of Expenditure
List rental

Category/ Type

Office Sought: [ ] House [ ] Senate [X] President State: DC District: 00

Name of Federal Candidate Supported or Opposed by Expenditure:
Mitt Romney

Check One: [ ] Support [X] Oppose

Calendar Year-To-Date Per Election for Office Sought 302352.08

Disbursement For: [ ] Primary [X] General 2012 [ ] Other (specify) ▶

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

Mailing Address

City State Zip Code

Date / /

Amount

Purpose of Expenditure

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President State: District:

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: [ ] Support [ ] Oppose

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 7623.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures ▶ 7623.00
(carry total from last page forward to Line 7)