ILLINOIS PLANNED PARENTHOOD COUNCIL

107 West Cook, Suite F • Springfield, Illinois 62704
(217) 522-6776 • Fax (217) 522-7055

RECEIVED
FEC MAIL
OPERATIONS CENTER

2006 APR 10 A 8:54

April 4, 2006

Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

To Whom It May Concern,

Please find enclosed the Report of Independent Expenditures and Contributions Received.

I certify that the Illinois Planned Parenthood Council is a qualified nonprofit corporation under the Federal Election Commission's regulations.

Sincerely,

Pamela A. Sutherland
President & CEO

26050969

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2006 APR 10 A 8:54

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12FE4M5

Life And Liberty PAC

ADDRESS (number and street) ▼ 809 Virginia Ave. SE

☐ Check if different than previously reported. (ACC)

Washington | DC | 20003 -

2. FEC IDENTIFICATION NUMBER ▼ — CITY ▲ — STATE ▲ — ZIP CODE ▲

C 00229385

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☒ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on __ / __ / ____ in the State of ____

(d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on __ / __ / ____ in the State of ____

5. Covering Period 01 / 01 / 2006 through 03 / 31 / 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: William L. Constantine, CPA - Assistant Treasurer

Signature of Treasurer: _____ Date 04 / 02 / 2006

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

Office Use Only							

FEC FORM 3X (Rev. 02/2003)

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SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
Life And Liberty PAC

Report Covering the Period: From: 01 / 01 / 2006 To: 03 / 31 / 2006

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2006		1,455 51
(b) Cash on Hand at Beginning of Reporting Period	1,455 51	
(c) Total Receipts (from Line 19)	0 00	0 00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1,455 51	1,455 51
7. Total Disbursements (from Line 31)	217 33	217 33
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1,238 18	1,238 18
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0 00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0 00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Life And Liberty PAC

Report Covering the Period: From: 01 / 01 / 2006 To: 03 / 31 / 2006

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0 00	
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	0 00	0 00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)	0 00	0 00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶		
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)		
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b)).	0 00	0 00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	0 00	0 00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	0 00	0 00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0 00	0 00
(ii) Non-Federal Share	0 00	0 00
(b) Other Federal Operating Expenditures	217 33	217 33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	217 33	217 33
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	0 00	0 00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶		
29. Other Disbursements	0 00	0 00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	217 33	217 33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	217 33	217 33

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0 00	0 00
34. Total Contribution Refunds (from Line 28(d))	0 00	0 00
35. Net Contributions (other than loans) (subtract Line 33 from Line 32)	0 00	0 00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	217 33	217 33
37. Offsets to Operating Expenditures (from Line 15, page 3)	0 00	0 00
38. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	217 33	217 33

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 1 OF 1

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Life And Liberty PAC

A.
Full Name (Last, First, Middle Initial): N/A
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period: 0 00

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ▶ 0 00

TOTAL This Period (last page this line number only) ▶ 0 00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Life And Liberty PAC

A.
Full Name (Last, First, Middle Initial): Wachovia Bank NA
Mailing Address: PO Box 563966
City: Charlotte, NC 28262 State: Zip Code:
Purpose of Disbursement: Bank Charges
Category/Type: 001
Candidate Name: N/A
Office Sought: [ ] House [ ] Senate [ ] President — N/A
State: District:
Disbursement For: [ ] Primary [ ] General [X] Other (specify) ▼ Non-Election
Date of Disbursement: 01 / 11 / 2006
Amount of Each Disbursement this Period: 5 00

B.
Full Name (Last, First, Middle Initial): Wachovia Bank NA
Mailing Address: PO Box 563966
City: Charlotte, NC 28262 State: Zip Code:
Purpose of Disbursement: Bank Charges
Category/Type: 001
Candidate Name: N/A
Office Sought: [ ] House [ ] Senate [ ] President — N/A
State: District:
Disbursement For: [ ] Primary [ ] General [X] Other (specify) ▼
Date of Disbursement: 02 / 09 / 2006
Amount of Each Disbursement this Period: 5 00

C.
Full Name (Last, First, Middle Initial): Wachovia Bank NA
Mailing Address: PO Box 563966
City: Charlotte, NC 28262 State: Zip Code:
Purpose of Disbursement: Bank Charges
Category/Type: 001
Candidate Name: N/A
Office Sought: [ ] House [ ] Senate [ ] President — N/A
State: District:
Disbursement For: [ ] Primary [ ] General [X] Other (specify) ▼
Date of Disbursement: 03 / 11 / 2006
Amount of Each Disbursement this Period: 5 00

SUBTOTAL of Disbursements This Page (optional) ▶ 15 00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Life And Liberty PAC

A.
Full Name (Last, First, Middle Initial): Directech, Inc
Mailing Address: 8595 Grovemont Circle
City: Gaithersburg, MD 20877 State: Zip Code:
Purpose of Disbursement: Caging Fees
Category/Type: 001
Candidate Name: N/A
Office Sought: [ ] House [ ] Senate [ ] President — N/A
State: District:
Disbursement For: [ ] Primary [ ] General [X] Other (specify) ▼ Non-Election
Date of Disbursement: 01 / 10 / 2006
Amount of Each Disbursement this Period: 202 33

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: / /
Amount of Each Disbursement this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: / /
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 202 33

TOTAL This Period (last page this line number only) ▶ 217 33

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SCHEDULE C (FEC Form 3X)
LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Life And Liberty PAC

LOAN SOURCE Full Name (Last, First, Middle Initial)
N/A

Mailing Address

City State ZIP Code

Election:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

TERMS

Date Incurred / / Date Due / / Interest Rate % (apr)

Secured: [ ] Yes [ ] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ..... ▶ 0 00

TOTALS This Period (last page in this line only) ..... ▶ 0 00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Life And Liberty PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
N/A

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ▶	0 00
2) TOTALS This Period (last page this line number only) ▶	0 00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0 00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	0 00

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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☑ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
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
KI PREPARER	4/10/06 DATE PREPARED

(3/2005)

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