

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

MI Planned Parenthood Votes

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

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)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
  - Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  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  /  /  through  /  /

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

Type or Print Name of Treasurer

Signature of Treasurer *Keserich, John, Thomas, ,* [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only								
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**MI Planned Parenthood Votes**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		2101.72
(b) Cash on Hand at Beginning of Reporting Period.....	2101.72	
(c) Total Receipts (from Line 19) .....	1487450.74	1487450.74
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1489552.46	1489552.46
7. Total Disbursements (from Line 31).....	289561.51	289561.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1199990.95	1199990.95
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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. 05/2016)

Write or Type Committee Name

**MI Planned Parenthood Votes**

Report Covering the Period: From:  /  /  To:  /  /

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	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1487450.74	1487450.74
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1487450.74	1487450.74
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(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)).....▶	1487450.74	1487450.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1487450.74	1487450.74

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	31200.74	31200.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	31200.74	31200.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	258360.77	258360.77
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	289561.51	289561.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	289561.51	289561.51

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1487450.74	1487450.74
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1487450.74	1487450.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	31200.74	31200.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	31200.74	31200.74

**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 6 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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)  
**MI Planned Parenthood Votes**

**A. PLANNED PARENTHOOD ADVOCATES OF MICHIGAN**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 19104

City LANSING	State MI	Zip Code 48901
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FEC ID number of contributing federal political committee. **C** C90006685

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
13272.94

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2020

**Transaction ID : SA11C.4385**

Amount of Each Receipt this Period  
13272.94

Memo Item  
In-kind - Staff Time

**B. PLANNED PARENTHOOD VOTES**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 123 WILLIAM ST.

City NEW YORK	State NY	Zip Code 10038
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FEC ID number of contributing federal political committee. **C** C00489799

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2020

**Transaction ID : SA11C.4125**

Amount of Each Receipt this Period  
650000.00

Memo Item  
Contribution

**C. PLANNED PARENTHOOD VOTES**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 123 WILLIAM ST.

City NEW YORK	State NY	Zip Code 10038
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FEC ID number of contributing federal political committee. **C** C00489799

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
854750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2020

**Transaction ID : SA11C.4127**

Amount of Each Receipt this Period  
204750.00

Memo Item  
Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	868022.94
<b>TOTAL</b> This Period (last page this line number only).....	

**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 7 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MI Planned Parenthood Votes**

**A. PLANNED PARENTHOOD VOTES**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 123 WILLIAM ST.

City NEW YORK	State NY	Zip Code 10038
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00489799

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
856984.78

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2020

**Transaction ID : SA11C.4226**

Amount of Each Receipt this Period  
2234.78

Memo Item  
In-kind - Planning Time

**B. PLANNED PARENTHOOD VOTES**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 123 WILLIAM ST.

City NEW YORK	State NY	Zip Code 10038
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00489799

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
857729.71

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2020

**Transaction ID : SA11C.4228**

Amount of Each Receipt this Period  
744.93

Memo Item  
In-kind - Planning Time

**C. PLANNED PARENTHOOD VOTES**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 123 WILLIAM ST.

City NEW YORK	State NY	Zip Code 10038
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FEC ID number of contributing federal political committee. **C** C00489799

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1059229.71

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2020

**Transaction ID : SA11C.4128**

Amount of Each Receipt this Period  
201500.00

Memo Item  
Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	204479.71
<b>TOTAL</b> This Period (last page this line number only).....	

**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 8 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MI Planned Parenthood Votes**

**A. PLANNED PARENTHOOD VOTES**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 123 WILLIAM ST.

City NEW YORK	State NY	Zip Code 10038
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00489799

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1064022.71

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 21 / 2020

**Transaction ID : SA11C.4220**

Amount of Each Receipt this Period  
 3293.00

Memo Item  
 In-kind - RBG

**B. PLANNED PARENTHOOD VOTES**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 123 WILLIAM ST.

City NEW YORK	State NY	Zip Code 10038
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00489799

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1060729.71

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 21 / 2020

**Transaction ID : SA11C.4221**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 In-kind - Biden vid

**C. PLANNED PARENTHOOD VOTES**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 123 WILLIAM ST.

City NEW YORK	State NY	Zip Code 10038
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FEC ID number of contributing federal political committee. **C** C00489799

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1067597.71

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2020

**Transaction ID : SA11C.4224**

Amount of Each Receipt this Period  
 3575.00

Memo Item  
 In-kind - Dialer Minutes

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8368.00
<b>TOTAL</b> This Period (last page this line number only).....	



**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 9 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MI Planned Parenthood Votes**

**A. PLANNED PARENTHOOD VOTES**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 123 WILLIAM ST.

City NEW YORK	State NY	Zip Code 10038
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FEC ID number of contributing federal political committee. **C** C00489799

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1073969.87

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2020

**Transaction ID : SA11C.4381**

Amount of Each Receipt this Period  
6372.16

Memo Item  
In-kind - Deployment

**B. PLANNED PARENTHOOD VOTES**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 123 WILLIAM ST.

City NEW YORK	State NY	Zip Code 10038
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FEC ID number of contributing federal political committee. **C** C00489799

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1074177.80

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2020

**Transaction ID : SA11C.4229**

Amount of Each Receipt this Period  
207.93

Memo Item  
In-kind - Staff Time

**C. STRATEGIC VICTORY FUND IE PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 744

City RALEIGH	State NC	Zip Code 27602
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FEC ID number of contributing federal political committee. **C** C00741769

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2020

**Transaction ID : SA11C.4122**

Amount of Each Receipt this Period  
400000.00

Memo Item  
Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	406580.09
<b>TOTAL</b> This Period (last page this line number only).....	1487450.74

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MI Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. PLANNED PARENTHOOD ADVOCATES OF MICHIGAN**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	0

Mailing Address PO BOX 19104

FEC Identification Number

**C** C90006685

**Transaction ID : SB21B.4386**

Amount of Each Disbursement this Period

13272.94

Memo Item

City  
LANSING

State  
MI

Zip Code  
48901

Purpose of Disbursement  
In-kind - Staff Time

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. PLANNED PARENTHOOD VOTES**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	2	0

Mailing Address 123 WILLIAM ST.

FEC Identification Number

**C** C00568931

**Transaction ID : SB21B.4227**

Amount of Each Disbursement this Period

2234.78

Memo Item

City  
NEW YORK

State  
NY

Zip Code  
10038

Purpose of Disbursement  
In-kind - Planning Time

Category/  
Type

Candidate Name

**MI Planned Parenthood Votes**

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. PLANNED PARENTHOOD VOTES**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	2	0

Mailing Address 123 WILLIAM ST.

FEC Identification Number

**C** C00568931

**Transaction ID : SB21B.4233**

Amount of Each Disbursement this Period

744.93

Memo Item

City  
NEW YORK

State  
NY

Zip Code  
10038

Purpose of Disbursement  
In-kind - Planning Time

Category/  
Type

Candidate Name

**MI Planned Parenthood Votes**

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

16252.65

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MI Planned Parenthood Votes**

**A. PLANNED PARENTHOOD VOTES**

Full Name (Last, First, Middle Initial)  
Mailing Address 123 WILLIAM ST.

City NEW YORK State NY Zip Code 10038

Purpose of Disbursement In-kind - Biden vid

Candidate Name **MI Planned Parenthood Votes**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 21 / 2020

FEC Identification Number: C00568931  
**Transaction ID : SB21B.4222**  
Amount of Each Disbursement this Period: 1500.00

Memo Item

**B. PLANNED PARENTHOOD VOTES**

Full Name (Last, First, Middle Initial)  
Mailing Address 123 WILLIAM ST.

City NEW YORK State NY Zip Code 10038

Purpose of Disbursement In-kind - RBG

Candidate Name **MI Planned Parenthood Votes**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 21 / 2020

FEC Identification Number: C00568931  
**Transaction ID : SB21B.4223**  
Amount of Each Disbursement this Period: 3293.00

Memo Item

**C. PLANNED PARENTHOOD VOTES**

Full Name (Last, First, Middle Initial)  
Mailing Address 123 WILLIAM ST.

City NEW YORK State NY Zip Code 10038

Purpose of Disbursement In-kind - Dialer Minutes

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 28 / 2020

FEC Identification Number: C00489799  
**Transaction ID : SB21B.4225**  
Amount of Each Disbursement this Period: 3575.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8368.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 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)

**MI Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. PLANNED PARENTHOOD VOTES**

Mailing Address 123 WILLIAM ST.

City  
NEW YORK

State  
NY

Zip Code  
10038

Purpose of Disbursement  
In-kind - Deployment

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	2	0

FEC Identification Number

**C** C00489799

**Transaction ID : SB21B.4382**

Amount of Each Disbursement this Period

6372.16

Memo Item

Full Name (Last, First, Middle Initial)

**B. PLANNED PARENTHOOD VOTES**

Mailing Address 123 WILLIAM ST.

City  
NEW YORK

State  
NY

Zip Code  
10038

Purpose of Disbursement  
In-kind - Staff Time

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	0

FEC Identification Number

**C** C00489799

**Transaction ID : SB21B.4232**

Amount of Each Disbursement this Period

207.93

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

6580.09

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

31200.74

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>MI Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00568931                 </div>
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Check if  24-hour report  48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group</b>			Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 09 / 15 / 2020		
Mailing Address 1110 Vermont Ave. NW Suite 300			Amount <span style="font-size: 24px; font-weight: bold;">52216.78</span>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : SE.4239</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 09 / 10 / 2020		
Purpose of Expenditure Direct Voter Contact		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose BIDEN, JOSEPH R JR, , ,		
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought		<span style="font-size: 24px; font-weight: bold;">65270.84</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group</b>			Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 09 / 15 / 2020		
Mailing Address 1110 Vermont Ave. NW Suite 300			Amount <span style="font-size: 24px; font-weight: bold;">52216.78</span>		
City Washington	State DC	Zip Code 20005	<b>Transaction ID : SE.4240</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 09 / 10 / 2020		
Purpose of Expenditure Direct Voter Contct		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD J., , ,		
Name of Federal Candidate: TRUMP, DONALD J., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought		<span style="font-size: 24px; font-weight: bold;">117487.62</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="font-size: 24px; font-weight: bold;">104433.56</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<span style="font-size: 24px; font-weight: bold;">0.00</span>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<span style="font-size: 24px; font-weight: bold;">104433.56</span>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

\_\_\_\_\_ *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y  
 Keserich, John, Thomas, , 04 / 21 / 2021  
 Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MI Planned Parenthood Votes
FEC IDENTIFICATION NUMBER C C00568931

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Community Outreach Group
Mailing Address 1110 Vermont Ave. NW Suite 300
City Washington State DC Zip Code 20005
Purpose of Expenditure Direct Voter Contact Category/Type 004
Date of Public Distribution/Dissemination 09/15/2020
Amount 52216.78
Transaction ID: SE.4242
Date of Disbursement or Obligation 09/10/2020

Name of Federal Candidate: JAMES, JOHN, , ,
Support Oppose
Office Sought: House Senate State: MI
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Community Outreach Group
Mailing Address 1110 Vermont Ave. NW Suite 300
City Washington State DC Zip Code 20005
Purpose of Expenditure Direct Voter Contact Category/Type 004
Date of Public Distribution/Dissemination 09/15/2020
Amount 52216.78
Transaction ID: SE.4243
Date of Disbursement or Obligation 09/10/2020

Name of Federal Candidate: PETERS, GARY, , ,
Support Oppose
Office Sought: House Senate State: MI
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 104433.56
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Keserich, John, Thomas, ,

[Electronically Filed]

Date 04/21/2021

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MI Planned Parenthood Votes
FEC IDENTIFICATION NUMBER C C00568931

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee The New Media Firm
Mailing Address 1730 Rhode Island NW Suite 213
City Washington State DC Zip Code 20036
Purpose of Expenditure Digital Video Ads Category/Type 004
Date of Public Distribution/Dissemination 09/24/2020
Amount 13054.06
Transaction ID: SE.4236
Date of Disbursement or Obligation 09/10/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,
Support Oppose
Office Sought: House Senate State: MI
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee The New Media Firm
Mailing Address 1730 Rhode Island NW Suite 213
City Washington State DC Zip Code 20036
Purpose of Expenditure Digital Video Ads Category/Type 004
Date of Public Distribution/Dissemination 09/15/2020
Amount 36439.59
Transaction ID: SE.4241
Date of Disbursement or Obligation 09/10/2020

Name of Federal Candidate: JAMES, JOHN, , ,
Support Oppose
Office Sought: House Senate State: MI
Disbursement For: Primary General 2020 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 49493.65, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 258360.77

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Keserich, John, Thomas, ,

[Electronically Filed]

Date 04/21/2021

Signature