

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

ADDRESS (number and street) 555 Capitol Mall, Suite 1425  
 Check if different than previously reported. (ACC)  
Sacramento CA 95814

2. **FEC IDENTIFICATION NUMBER** C00488502  
**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 Quarterly 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 11 23 2010 through 12 31 2010

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 Annie Lundahl

Signature of Treasurer Electronically Filed by Annie Lundahl Date 01 31 2010

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									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

Report Covering the Period: From: 

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	1	0									
0.00												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%;"><tr><td align="right">19782.10</td></tr></table>	19782.10										
19782.10												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%;"><tr><td align="right">41.00</td></tr></table>	41.00	<table border="1" style="width: 100%;"><tr><td align="right">419963.29</td></tr></table>	419963.29								
41.00												
419963.29												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%;"><tr><td align="right">19823.10</td></tr></table>	19823.10	<table border="1" style="width: 100%;"><tr><td align="right">419963.29</td></tr></table>	419963.29								
19823.10												
419963.29												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%;"><tr><td align="right">4175.59</td></tr></table>	4175.59	<table border="1" style="width: 100%;"><tr><td align="right">404315.78</td></tr></table>	404315.78								
4175.59												
404315.78												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%;"><tr><td align="right">15647.51</td></tr></table>	15647.51	<table border="1" style="width: 100%;"><tr><td align="right">15647.51</td></tr></table>	15647.51								
15647.51												
15647.51												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">21.38</td></tr></table>	21.38										
21.38												

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

Report Covering the Period: From: 

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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	190390.02
(ii) Unitemized .....	0.00	1720.93
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	192110.95
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	227680.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	419790.95
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	131.34
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	41.00	41.00
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 Transfer (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)) .....	41.00	419963.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	41.00	419963.29

## 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) Shared 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.....	3408.90	29506.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3408.90	29506.02
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 Expenditure (use Schedule E) .....	451.25	219989.46
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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	34500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	34500.00
29. Other Disbursements.....	315.44	120320.30
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	4175.59	404315.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4175.59	404315.78

**DETAILED SUMMARY PAGE**  
of Disbursements

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	419790.95
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	34500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	385290.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3408.90	29506.02
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	131.34
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3408.90	29374.68

**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)

PAGE 6 / 13

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<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)

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A.

Full Name (Last, First, Middle Initial)

Olson, Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Legal & Reporting Services

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: EXPB218

Date of Disbursement

12 / 15 / 2010

Amount of Each Disbursement this Period

2667.60

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

2667.60

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

2667.60

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

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA	FEC IDENTIFICATION NUMBER <b>C</b> C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

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Mailing Address  
454 9th Avenue

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City Menlo Park	State CA	Zip Code 94025
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Purpose of Expenditure Editing for DVD Clips	Category/ Type 24E
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Name of Federal Candidate supported or Opposed by expenditure:  
Barbara Boxer

---

Calendar Year-To-Date Per Election  
for Office Sought 189204.39

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

---

Amount  
390.00

Transaction ID: PDTE11

---

Office Sought:  House State: CA  
 Senate District: \_\_\_\_\_  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee  
Planned Parenthood Advocates Mar Monte

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Mailing Address  
1691 The Alameda

---

City San Jose	State CA	Zip Code 95126
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Purpose of Expenditure Shipping of Palm Car- ds	Category/ Type 24E
---	--------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Barbara Boxer

---

Calendar Year-To-Date Per Election  
for Office Sought 189204.39

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

---

Amount  
10.69

Transaction ID: PDTE14

---

Office Sought:  House State: CA  
 Senate District: \_\_\_\_\_  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	390.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

---

Annie Lundahl  
Signature

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

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

NAME OF COMMITTEE (In Full) Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA		FEC IDENTIFICATION NUMBER <b>C</b> C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		
Full Name (Last, First, Middle, Initial) of Payee Brianna Schwanke		Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 1 0
Mailing Address 147 Lexington Ave		Amount 61.25
City State Zip Code Redwood City CA 94062		<b>Transaction ID:</b> PDTE12
Purpose of Expenditure Blogging for DVD Clips		Office Sought: <input type="checkbox"/> House State: CA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Category/Type 24E		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: Barbara Boxer		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____
Calendar Year-To-Date Per Election for Office Sought		189204.39

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	61.25
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	451.25
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 (if the reporting entity is not a political party committee) any political party committee or its agent.	
Annie Lundahl Signature	Date M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 1 0

**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)

PAGE 9 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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)

Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

<b>A.</b> Full Name (Last, First, Middle Initial) The Blue Deal Inc. <hr/> Mailing Address P.O. Box 2705 <hr/> City Fairfax State VA Zip Code 22031 <hr/> Purpose of Disbursement Shipping of Materials Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> EXPB215 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 157.72 Category/Type 24E
<b>B.</b> Full Name (Last, First, Middle Initial) The Blue Deal Inc. <hr/> Mailing Address P.O. Box 2705 <hr/> City Fairfax State VA Zip Code 22031 <hr/> Purpose of Disbursement State Election Activity Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> EXPB213 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 157.72 Category/Type 011

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

315.44

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

315.44

**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)  
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Matthew Luotto	Nature of Debt (Purpose): Editing for DVD Clips
Mailing Address 454 9th Avenue	
City State ZIP Code Menlo Park CA 94025	

Outstanding Balance Beginning This Period 390.00	<b>Transaction ID: PAYD205</b>	
Amount Incurred This Period 0.00	Payment This Period 390.00	Outstanding Balance at Close of This Period 0.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Planned Parenthood Advocates Mar Monte	Nature of Debt (Purpose): Shipping of Palm Cards
Mailing Address 1691 The Alameda	
City State ZIP Code San Jose CA 95126	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: PAYD219</b>	
Amount Incurred This Period 10.69	Payment This Period 0.00	Outstanding Balance at Close of This Period 10.69

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Planned Parenthood Advocates Mar Monte	Nature of Debt (Purpose): State Activity
Mailing Address 1691 The Alameda	
City State ZIP Code San Jose CA 95126	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: PAYD220</b>	
Amount Incurred This Period 10.69	Payment This Period 0.00	Outstanding Balance at Close of This Period 10.69

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>21.38</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

A. Form/Schedule : **SD10**

Previously reported as esimate for 10/29/10 - 11/2/10

Transaction ID : **PAYD205**

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 / 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Brianna Schwanke	Nature of Debt (Purpose): Blogging for DVD Clips
Mailing Address 147 Lexington Ave	
City State ZIP Code Redwood City CA 94062	

Outstanding Balance Beginning This Period <input type="text" value="61.25"/>	<b>Transaction ID: PAYD208</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="61.25"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor The Blue Deal Inc.	Nature of Debt (Purpose): Shipping of Materials
Mailing Address P.O. Box 2705	
City State ZIP Code Fairfax VA 22031	

Outstanding Balance Beginning This Period <input type="text" value="157.72"/>	<b>Transaction ID: PAYD211</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="157.72"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor The Blue Deal Inc.	Nature of Debt (Purpose): State Election Activity
Mailing Address P.O. Box 2705	
City State ZIP Code Fairfax VA 22031	

Outstanding Balance Beginning This Period <input type="text" value="157.72"/>	<b>Transaction ID: PAYD212</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="157.72"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only).....	<input type="text" value="21.38"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="21.38"/>

A. Form/Schedule : **SD10**

Previously reported as esimate for 10/29/10 - 11/2/10

Transaction ID : **PAYD208**