

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** CITY STATE ZIPCODE

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE-Election** Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on _____ in the State of _____

- (d) 30-Day **Post -Election** Report for the:
- | | | |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---|---------------------------------------|--|

Election on 11 02 2010 in the State of CA

5. Covering Period 10 14 2010 through 11 22 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 12 02 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	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

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"><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		0.00
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	157898.02									
(c) Total Receipts (from Line 19)	85417.76	414883.29								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	243315.78	414883.29								
7. Total Disbursements (from Line 31)	228533.59	400101.10								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	14782.19	14782.19								
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)	8000.00									

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

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: 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)	34757.76	185351.02
(ii) Unitemized	660.00	1720.93
(iii) TOTAL (add Lines 11(a)(i) and (ii)	35417.76	187071.95
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	50000.00	227680.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	85417.76	414751.95
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.)	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 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))	85417.76	414883.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	85417.76	414883.29

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.....	22988.64	26097.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	22988.64	26097.12
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)	175928.60	219499.12
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.....	29616.35	120004.86
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))..	228533.59	400101.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	228533.59	400101.10

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)	85417.76	414751.95
34. Total Contribution Refunds (from Line 28(d))	0.00	34500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	85417.76	380251.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	22988.64	26097.12
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	131.34
38. Net Operating Expenditures (subtract Line 37 from Line 36)	22988.64	25965.78

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)

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

A.

Full Name (Last, First, Middle Initial)

Sarah K. Aubrey

Mailing Address 16 South Oakland Avenue, Suite 200

City State Zip Code
Pasadena CA 91101

FEC ID number of contributing federal political committee.

C

Name of Employer
Deep Eddy Productions

Occupation
Television Producer

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: INCA167

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Steven Blank

Mailing Address 216 Marmona Drive

City State Zip Code
Menlo Park CA 94025

FEC ID number of contributing federal political committee.

C

Name of Employer
Stanford University

Occupation
Lecturer

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: INCA165

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Julian Cortella

Mailing Address 3826 Alameda de las Pulgas

City State Zip Code
Menlo Park CA 94025

FEC ID number of contributing federal political committee.

C

Name of Employer
Summit Preparatory Charter High School

Occupation
Teacher

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: IDTA23

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL 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: PAGE 7 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)

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

A.

Full Name (Last, First, Middle Initial)

Planned Parenthood Affiliates of California

Mailing Address 555 Capitol Mall, Suite 510

City State Zip Code
Sacramento CA 95814

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
62637.84

Date of Receipt

10 / 25 / 2010

Transaction ID: INCA186IDTA23

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Annette P. Cumming

Mailing Address 165 Huckleberry Drive

City State Zip Code
Jackson WY 83001

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

Name of Employer Occupation
Forthcoming Fund President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

10 / 15 / 2010

Transaction ID: INCA101

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Eva Grove

Mailing Address 171 Main Street, #278

City State Zip Code
Los Altos CA 94022

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

10 / 20 / 2010

Transaction ID: IDTA25

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) ►

6000.00

TOTAL 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: PAGE 8 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)

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

A.

Full Name (Last, First, Middle Initial)
Planned Parenthood Affiliates of California

Mailing Address 555 Capitol Mall, Suite 510

City State Zip Code
Sacramento CA 95814

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
62637.84

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: INCA186IDTA25

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Planned Parenthood Action Fund of San Diego and Riverside Counties

Mailing Address 1075 Camino del Rio South

City State Zip Code
San Diego CA 92108

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2549.42

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Transaction ID: INCA77

Amount of Each Receipt this Period

1041.00

C.

Full Name (Last, First, Middle Initial)
Planned Parenthood Action Fund of San Diego and Riverside Counties

Mailing Address 1075 Camino del Rio South

City State Zip Code
San Diego CA 92108

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2549.42

Date of Receipt

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

Transaction ID: INCA151

Amount of Each Receipt this Period

1143.50

SUBTOTAL of Receipts This Page (optional)

2184.50

TOTAL This Period (last page this line number only)

B. Form/Schedule : **SA11AI**
Transaction ID : **INCA77**

Phonebanking and Other Voter Contact (Estimate for 10/17/10 - 10/29/10)

C. Form/Schedule : **SA11AI**
Transaction ID : **INCA151**

In-Kind Contribution - Staff Time & Other Voter Contact (10/30/10 - 11/2/10)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 10 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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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)
Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo, Inc.
Mailing Address 518 Garden Street

City State Zip Code
Santa Barbara CA 93117

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 626.16

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 17 / 2010

Transaction ID: INCA73

Amount of Each Receipt this Period
212.17

B. Full Name (Last, First, Middle Initial)
Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo, Inc.
Mailing Address 518 Garden Street

City State Zip Code
Santa Barbara CA 93117

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

Name of Employer Occupation

Receipt For: 2010 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 626.16

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 30 / 2010

Transaction ID: INCA149

Amount of Each Receipt this Period
147.84

C. Full Name (Last, First, Middle Initial)
Planned Parenthood Advocacy Project Los Angeles
Mailing Address 400 West 30th Street

City State Zip Code
Los Angeles CA 90007

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

Name of Employer Occupation

Receipt For: 2010 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5738.33

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 17 / 2010

Transaction ID: INCA83

Amount of Each Receipt this Period
2445.05

SUBTOTAL of Receipts This Page (optional) ► **2805.06**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INCA73**

In-Kind Contribution - Staff Time & Other Voter Contact (10/17/10 - 10/29/10)

B. Form/Schedule : **SA11AI**
Transaction ID : **INCA149**

In-Kind Contribution - Staff Time & Other Voter Contact (10/30/10 - 11/2/10)

C. Form/Schedule : **SA11AI**

In-Kind Contribution: Phonebanking & Other Voter Contact (Estimate for 10/17/10 -10/29/10)

Transaction ID : **INCA83**

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 13 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)

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

A.

Full Name (Last, First, Middle Initial)
Planned Parenthood Advocacy Project Los Angeles

Mailing Address 400 West 30th Street

City State Zip Code
Los Angeles CA 90007

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5738.33

Date of Receipt

M M / D D / Y Y Y Y
10 / 30 / 2010

Transaction ID: INCA145

Amount of Each Receipt this Period

743.42

B.

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

Mailing Address 1691 The Alameda

City State Zip Code
San Jose CA 95126

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
53148.01

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2010

Transaction ID: INCA79

Amount of Each Receipt this Period

1082.12

C.

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

Mailing Address 1691 The Alameda

City State Zip Code
San Jose CA 95126

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
53148.01

Date of Receipt

M M / D D / Y Y Y Y
10 / 30 / 2010

Transaction ID: INCA196

Amount of Each Receipt this Period

851.33

SUBTOTAL of Receipts This Page (optional)

2676.87

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **INCA145**

In-Kind Contribution - Phonebanking & Other Voter Contact (10/30/10 - 11/2/10)

B. Form/Schedule : **SA11AI**
Transaction ID : **INCA79**

In-Kind Contribution: Phonebanking & Other Voter Contact (Estimate for 10/17/10 - 10/29/10)

C. Form/Schedule : **SA11AI**
Transaction ID : **INCA196**

In-Kind Contribution - Phonebanking & Other Voter Contact (10/30/10 - 11/2/10)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)

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

A.

Full Name (Last, First, Middle Initial)
Planned Parenthood Affiliates of California

Mailing Address 555 Capitol Mall, Suite 510

City	State	Zip Code
Sacramento	CA	95814

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

Name of Employer Occupation

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

62637.84

Date of Receipt

MM / DD / YYYY
10 / 17 / 2010

Transaction ID: INCA71

Amount of Each Receipt this Period

3072.24

B.

Full Name (Last, First, Middle Initial)
Planned Parenthood Affiliates of California

Mailing Address 555 Capitol Mall, Suite 510

City	State	Zip Code
Sacramento	CA	95814

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

Name of Employer Occupation

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

62637.84

Date of Receipt

MM / DD / YYYY
10 / 30 / 2010

Transaction ID: INCA139

Amount of Each Receipt this Period

1533.62

C.

Full Name (Last, First, Middle Initial)
Planned Parenthood of Orange and San Bernardino Counties Action Fund

Mailing Address 700 S. Tustin Street

City	State	Zip Code
Orange	CA	92866

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

Name of Employer Occupation

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

1465.74

Date of Receipt

MM / DD / YYYY
10 / 17 / 2010

Transaction ID: INCA197

Amount of Each Receipt this Period

801.81

SUBTOTAL of Receipts This Page (optional)

5407.67

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **INCA71**

In-Kind Contribution - Phonebanking & Other Voter Contact (10/17/10 - 10/29/10)

B. Form/Schedule : **SA11AI**
Transaction ID : **INCA139**

In-Kind Contribution - Phonebanking & Other Voter Contact (10/30/10 - 11/2/10)

C. Form/Schedule : **SA11AI**
Transaction ID : **INCA197**

In-Kind Contribution: Phonebanking & Other Voter Contact (10/17/10 - 10/29/10)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 19 / 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)

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

A.

Full Name (Last, First, Middle Initial)

Planned Parenthood of Orange and San Bernardino Counties Action Fund

Mailing Address 700 S. Tustin Street

City State Zip Code
Orange CA 92866

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1465.74

Date of Receipt

M M / D D / Y Y Y Y
10 / 30 / 2010

Transaction ID: INCA147

Amount of Each Receipt this Period

629.07

B.

Full Name (Last, First, Middle Initial)

Planned Parenthood Shasta-Diablo Action Fund

Mailing Address 2185 Pacheco Blvd.

City State Zip Code
Concord CA 94522

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13726.45

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2010

Transaction ID: INCA102

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Planned Parenthood Shasta-Diablo Action Fund

Mailing Address 2185 Pacheco Blvd.

City State Zip Code
Concord CA 94522

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13726.45

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2010

Transaction ID: INCA75

Amount of Each Receipt this Period

809.81

SUBTOTAL of Receipts This Page (optional) ▶

6438.88

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INCA147**

In-Kind Contribution - Phonebanking & Other Voter Contact (10/30/10 - 11/2/10)

C. Form/Schedule : **SA11AI**
Transaction ID : **INCA75**

In-Kind Contribution: Phonebanking & Other Voter Contact (Estimate for 10/17/10 - 10/29/10)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 21 / 58
(check only one)
 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)
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A. Full Name (Last, First, Middle Initial)
Planned Parenthood Shasta-Diablo Action Fund
Mailing Address 2185 Pacheco Blvd.

City State Zip Code
Concord CA 94522

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 13726.45

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

Transaction ID: INCA168

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Planned Parenthood Shasta-Diablo Action Fund
Mailing Address 2185 Pacheco Blvd.

City State Zip Code
Concord CA 94522

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 13726.45

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

Transaction ID: INCA141

Amount of Each Receipt this Period
244.78

SUBTOTAL of Receipts This Page (optional) ► 2744.78

TOTAL This Period (last page this line number only) ► 34757.76

B. Form/Schedule : **SA11AI**

In-Kind Contribution - Phonebanking & Other Voter Contact (10/30/10 - 11/2/10)

Transaction ID : **INCA141**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 58

(check only one)

<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)

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

A.

Full Name (Last, First, Middle Initial)

Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo PAC

Mailing Address 518 Garden Street

City	State	Zip Code
Santa Barbara	CA	93101

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

Name of Employer Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

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

Transaction ID: INCA160

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo PAC

Mailing Address 518 Garden Street

City	State	Zip Code
Santa Barbara	CA	93101

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

Name of Employer Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: INCA163

Amount of Each Receipt this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

Planned Parenthood of Orange and San Bernardino Counties Community Action Fund PAC

Mailing Address 555 Capitol Mall, Suite 1425

City	State	Zip Code
Sacramento	CA	95814

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

Name of Employer Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

Transaction ID: INCA162

Amount of Each Receipt this Period

25000.00

SUBTOTAL of Receipts This Page (optional) ▶

40000.00

TOTAL 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:		PAGE 24 / 58	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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)
Protecting Choice in California 2010, a project of Planned Parenthood Affiliates of CA

A.	Full Name (Last, First, Middle Initial) Planned Parenthood San Diego & Riverside Counties Action Fund		Date of Receipt
	Mailing Address 555 Capitol Mall, Suite 1425		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Sacramento	CA	95814
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: INCA164
Receipt For:		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="20000.00"/>	<input type="text" value="10000.00"/>
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="50000.00"/>

**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)

<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) Feminist Majority Mailing Address 433 S. Victory Blvd. City State Zip Code Beverly Hills CA 90212 Purpose of Disbursement Election Night Watch Party Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB193 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 1 0	Amount of Each Disbursement this Period 1332.88
B.	Full Name (Last, First, Middle Initial) Olson, Hagel & Fishburn, LLP Mailing Address 555 Capitol Mall, Suite 1425 City State Zip Code Sacramento CA 95814 Purpose of Disbursement Legal & Reporting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB174 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period 7559.03
C.	Full Name (Last, First, Middle Initial) Olson, Hagel & Fishburn, LLP Mailing Address 555 Capitol Mall, Suite 1425 City State Zip Code Sacramento CA 95814 Purpose of Disbursement Legal & Reporting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB187 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period 14096.73

SUBTOTAL of Disbursements This Page (optional) ►

22988.64

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

22988.64

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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Alliance Print & Design

Mailing Address
930 R Street

City Sacramento	State CA	Zip Code 95811
--------------------	-------------	-------------------

Purpose of Expenditure Palm Cards	Category/ Type 24E
--------------------------------------	--------------------------

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

Calendar Year-To-Date Per Election for Office Sought	190953.36
---	-----------

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

Amount
212.75

Transaction ID: EDTEALC53

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Mailing Address
315 Smith Street, Apt. 3

City Brooklyn	State NY	Zip Code 11231
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Purpose of Expenditure Blogging Articles	Category/ Type 24E
---	--------------------------

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

Calendar Year-To-Date Per Election for Office Sought	190953.36
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
150.00

Transaction ID: EDTEALC43

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	362.75
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
315 Smith Street, Apt. 3

City State Zip Code
Brooklyn NY 11231

Purpose of Expenditure Category/Type
Blogs 24E

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

Calendar Year-To-Date Per Election for Office Sought 190953.36

Date
MM / DD / YYYY
10 / 26 / 2010

Amount
300.00

Transaction ID: EDTEALC71

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Mailing Address
1415 Sheridan, #21

City State Zip Code
Chico CA 95926

Purpose of Expenditure Category/Type
Media Organizing 24E

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

Calendar Year-To-Date Per Election for Office Sought 190953.36

Date
MM / DD / YYYY
10 / 25 / 2010

Amount
1000.00

Transaction ID: EDTEALC55

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1300.00
(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.

Annie Lundahl
Signature

Date
MM / DD / YYYY
12 / 02 / 2010

**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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
P.O. Box 1414

City Menlo Park	State CA	Zip Code 94026
--------------------	-------------	-------------------

Purpose of Expenditure Film Clips	Category/ Type 24E
--------------------------------------	--------------------------

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

Calendar Year-To-Date Per Election for Office Sought	190953.36
---	-----------

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

Amount
35.15

Transaction ID: EDTEALC48

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Mailing Address
1166 West Garvey

City Monterey	State CA	Zip Code 91754
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Purpose of Expenditure Stickers	Category/ Type 24E
------------------------------------	--------------------------

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

Calendar Year-To-Date Per Election for Office Sought	190953.36
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Amount
799.95

Transaction ID: EDTEALC65

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	835.10
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
433 S. Victory Blvd.

City State Zip Code
Beverly Hills CA 90212

Purpose of Expenditure Category/Type
Blogging & Reporting 24E

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

Calendar Year-To-Date Per Election for Office Sought
190953.36

Date
MM / DD / YYYY
10 / 26 / 2010

Amount
125.00

Transaction ID: EDTEALC70

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Mailing Address
454 9th Avenue

City State Zip Code
Menlo Park CA 94025

Purpose of Expenditure Category/Type
YouTube Videos 24E

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

Calendar Year-To-Date Per Election for Office Sought
190953.36

Date
MM / DD / YYYY
10 / 19 / 2010

Amount
120.00

Transaction ID: EDTEALC44

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	245.00
(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.

Annie Lundahl
Signature

Date MM / DD / YYYY
12 / 02 / 2010

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 ▼ C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
 Marina Graphic Center, Inc.

Mailing Address
 12901 Cerise Avenue

City State Zip Code
 Hawthorne CA 90250

Purpose of Expenditure Category/Type
 Signs & Flyers 24E

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

Calendar Year-To-Date Per Election for Office Sought 190953.36

Date
 M M / D D / Y Y Y Y
 1 0 / 1 9 / 2 0 1 0

Amount
6349.82

Transaction ID: EDTEALC45

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

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

Mailing Address
 1700 I Street, Suite 210

City State Zip Code
 Sacramento CA 95811

Purpose of Expenditure Category/Type
 Radio Ads 24E

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

Calendar Year-To-Date Per Election for Office Sought 190953.36

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

Amount
60000.00

Transaction ID: EDTEALC49

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	66349.82
(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.

Annie Lundahl
 Signature _____

Date M M / D D / Y Y Y Y
 1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
KFMB-AM

Mailing Address
7677 Engineer Road

City San Diego	State CA	Zip Code 92111
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Purpose of Expenditure Radio Ads	Category/ Type 24E
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election
for Office Sought

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

Amount
3000.00

Transaction ID: EDTEGALC4981

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
KFMB-FM

Mailing Address
7677 Engineer Road

City San Diego	State CA	Zip Code 92111
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Purpose of Expenditure Radio Ads	Category/ Type 24E
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election
for Office Sought

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

Amount
11200.00

Transaction ID: EDTEGALC4972

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 ▼ C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
KHTS-FM

Mailing Address
9660 Granite Ridge Drive

City	State	Zip Code
San Diego	CA	92123

Purpose of Expenditure Radio Ads	Category/ Type
	24E

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Date

M M	/	D D	/	Y Y Y Y
1 0		2 1		2 0 1 0

Amount

6750.00

Transaction ID: EDTEGALC4973

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
KIFM-FM

Mailing Address
1615 Murray Canyon Road, Suite 710

City	State	Zip Code
San Diego	CA	92123

Purpose of Expenditure Radio Ads	Category/ Type
	24E

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Date

M M	/	D D	/	Y Y Y Y
1 0		2 1		2 0 1 0

Amount

6325.00

Transaction ID: EDTEGALC4974

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Annie Lundahl
Signature

Date

M M	/	D D	/	Y Y Y Y
1 2		0 2		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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
KMYI-FM

Mailing Address
9660 Granite Ridge Drive

City San Diego	State CA	Zip Code 92123
-------------------	-------------	-------------------

Purpose of Expenditure Radio Ads	Category/ Type 24E
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election
for Office Sought

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

Amount
22500.00

Transaction ID: EDTEGALC4975

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
KOGO-AM

Mailing Address
9660 Granite Ridge Drive

City San Diego	State CA	Zip Code 92123
-------------------	-------------	-------------------

Purpose of Expenditure Radio Ads	Category/ Type 24E
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election
for Office Sought

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

Amount
3600.00

Transaction ID: EDTEGALC4980

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
XHRM-FM

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

Mailing Address
6160 Cornerstone Court, Suite 100

Amount
10100.00

City State Zip Code
San Diego CA 92121

Transaction ID: EDTEGALC4976

Purpose of Expenditure
Radio Ads

Category/
Type 24E

Office Sought: House State: _____
 Senate District: _____
 Presidential

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) : _____

[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
XHTZ-FM

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

Mailing Address
6160 Cornerstone Court, Suite 100

Amount
6525.00

City State Zip Code
San Diego CA 92121

Transaction ID: EDTEGALC4977

Purpose of Expenditure
Radio Ads

Category/
Type 24E

Office Sought: House State: _____
 Senate District: _____
 Presidential

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) : _____

[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
1700 I Street, Suite 210

City Sacramento	State CA	Zip Code 95811
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Purpose of Expenditure Radio Ads	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 190953.36

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
10000.00

Transaction ID: EDTEALC56

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Mailing Address
2425 Meadowbrook Road

City Sacramento	State CA	Zip Code 95825
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Purpose of Expenditure Mailer	Category/ Type 24E
----------------------------------	--------------------------

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

Calendar Year-To-Date Per Election
for Office Sought 190953.36

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Amount
29944.98

Transaction ID: PDTE1

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	39944.98
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

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

Mailing Address
2425 Meadowbrook Road

City Sacramento	State CA	Zip Code 95825
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Purpose of Expenditure Mailer	Category/ Type 24A
----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought	29545.76
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Amount
28571.76

Transaction ID: PDTE2

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Mailing Address
2425 Meadowbrook Road

City Sacramento	State CA	Zip Code 95825
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Purpose of Expenditure Signs	Category/ Type 24A
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Name of Federal Candidate supported or Opposed by expenditure:
Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought	29545.76
---	----------

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

Amount
974.00

Transaction ID: EDTEALC51

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	29545.76
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 ▼ C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
2425 Meadowbrook Road

City Sacramento	State CA	Zip Code 95825
Purpose of Expenditure Shipping for Mailer		Category/ Type 24E

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

Calendar Year-To-Date Per Election for Office Sought	190953.36
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Amount
1250.00

Transaction ID: PDTE8

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

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

Mailing Address
2425 Meadowbrook Road

City Sacramento	State CA	Zip Code 95825
Purpose of Expenditure Shipping for Mailer		Category/ Type 24E

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

Calendar Year-To-Date Per Election for Office Sought	190953.36
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Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Amount
1250.00

Transaction ID: PDTE9

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	2500.00
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Action Fund of San Diego and Riversi-
de Counties

Mailing Address
1075 Camino del Rio South

City San Diego	State CA	Zip Code 92108
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Purpose of Expenditure
Phonebanking & Other
Voter Contact (Estim-
ate for 10/17/10 -
10/29/10)
Category/
Type **24E**

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

Date
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Amount
1041.00

Transaction ID: EDTEALC39

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election
for Office Sought **190953.36**

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Action Fund of San Diego and Riversi-
de Counties

Mailing Address
1075 Camino del Rio South

City San Diego	State CA	Zip Code 92108
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Purpose of Expenditure
Phonebanking & Other
Voter Contact (10/30-
10 - 11/2/10)
Category/
Type **24E**

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

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

Amount
1143.50

Transaction ID: EDTEALC64

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election
for Office Sought **190953.36**

(a) SUBTOTAL of Itemized Independent Expenditures	2184.50
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Action Fund of Santa Barbara, Ventura
and San Luis Obispo, Inc.

Mailing Address
518 Garden Street

City Santa Barbara	State CA	Zip Code 93117
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Purpose of Expenditure
Phonebanking & Other
Voter Contact (Estimate for 10/17/10 -
11/29/10)

Category/
Type **24E**

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

Date
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Amount
212.17

Transaction ID: EDTEALC37

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election
for Office Sought **190953.36**

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Action Fund of Santa Barbara, Ventura
and San Luis Obispo, Inc.

Mailing Address
518 Garden Street

City Santa Barbara	State CA	Zip Code 93117
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Purpose of Expenditure
Phonebanking & Other
Voter (10/30/10 - 11-
2/10)

Category/
Type **24E**

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

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

Amount
147.84

Transaction ID: EDTEALC63

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election
for Office Sought **190953.36**

(a) SUBTOTAL of Itemized Independent Expenditures	360.01
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Advocacy Project Los Angeles

Mailing Address
400 West 30th Street

City State Zip Code
Los Angeles CA 90007

Purpose of Expenditure
Phonebanking & Other
Voter Contact (Estim-
ate for 10/17/10 -
10/29/10)

Category/
Type **24E**

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

Calendar Year-To-Date Per Election
for Office Sought **190953.36**

Date
M M / D D / Y Y Y Y
10 / 17 / 2010

Amount
2445.05

Transaction ID: EDTEALC42

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Advocacy Project Los Angeles

Mailing Address
400 West 30th Street

City State Zip Code
Los Angeles CA 90007

Purpose of Expenditure
Phonebanking & Other
Voter Contact (10/30-
10 - 11/2/10)

Category/
Type **24E**

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

Calendar Year-To-Date Per Election
for Office Sought **190953.36**

Date
M M / D D / Y Y Y Y
10 / 30 / 2010

Amount
743.42

Transaction ID: EDTEALC61

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	3188.47
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
12 / 02 / 2010

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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
1691 The Alameda

City State Zip Code
San Jose CA 95126

Purpose of Expenditure
Phonebanking & Other
Voter Contact (Estim-
ate for 10/17/10 -
10/29/10)

Category/
Type **24E**

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

Calendar Year-To-Date Per Election
for Office Sought **190953.36**

Date
M M / D D / Y Y Y Y
10 / 17 / 2010

Amount
1082.12

Transaction ID: EDTEALC40

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

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

Mailing Address
1691 The Alameda

City State Zip Code
San Jose CA 95126

Purpose of Expenditure
Phonebanking & Other
Voter Contact (10/30-
10 - 11/2/10)

Category/
Type **24E**

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

Calendar Year-To-Date Per Election
for Office Sought **190953.36**

Date
M M / D D / Y Y Y Y
10 / 30 / 2010

Amount
851.33

Transaction ID: EDTEALC60

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1933.45
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
12 / 02 / 2010

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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Affiliates of California

Mailing Address
555 Capitol Mall, Suite 510

City State Zip Code
Sacramento CA 95814

Purpose of Expenditure
Phonebanking & Other
Voter Contact (Estim-
ate for 10/17/10 -
10/29/10)

Category/
Type **24E**

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

Calendar Year-To-Date Per Election
for Office Sought **190953.36**

Date
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Amount
3072.24

Transaction ID: EDTEALC36

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Affiliates of California

Mailing Address
555 Capitol Mall, Suite 510

City State Zip Code
Sacramento CA 95814

Purpose of Expenditure
Phonebanking & Other
Voter Contact (10/30-
10 - 11/2/10)

Category/
Type **24E**

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

Calendar Year-To-Date Per Election
for Office Sought **190953.36**

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

Amount
1533.62

Transaction ID: EDTEALC58

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	4605.86
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Affiliates of California

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	0

Mailing Address
555 Capitol Mall, Suite 510

Amount

1000.00

City State Zip Code
Sacramento CA 95814

Transaction ID: PDTE10

Purpose of Expenditure
Voter Contact

Category/
Type **24E**

Office Sought: House State: CA
 Senate District: _____
 Presidential

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

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought

190953.36

Disbursement For: Primary General
 Other (specify) : _____
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood of Orange and San Bernardino Counties
Action Fund

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	1	0

Mailing Address
700 S. Tustin Street

Amount

801.81

City State Zip Code
Orange CA 92866

Transaction ID: EDTEALC78

Purpose of Expenditure
Phonebanking & Other
Voter Contact 10/17/-
~~10-10/29/10~~

Category/
Type **24E**

Office Sought: House State: CA
 Senate District: _____
 Presidential

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

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought

190953.36

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	<table border="1" style="display:inline-table"><tr><td>801.81</td></tr></table>	801.81
801.81		
(b) SUBTOTAL of Unitemized Independent Expenditures	<table border="1" style="display:inline-table"><tr><td> </td></tr></table>	
(c) TOTAL Independent Expenditures	<table border="1" style="display:inline-table"><tr><td> </td></tr></table>	

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
1	2		0	2		2	0	1	0

A. Form/Schedule : **SE**

(Estimate for 10/29/10 - 11/2/10)

Transaction ID : **PDTE10**

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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood of Orange and San Bernardino Counties
Action Fund

Mailing Address
700 S. Tustin Street

City Orange	State CA	Zip Code 92866
----------------	-------------	-------------------

Purpose of Expenditure
Phonebanking & Other
Voter Contact for (1-
0/30/10 - 11/2/10)

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

Calendar Year-To-Date Per Election
for Office Sought 190953.36

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

Amount
629.07

Transaction ID: EDTEALC62

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Shasta-Diablo Action Fund

Mailing Address
2185 Pacheco Blvd.

City Concord	State CA	Zip Code 94522
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Purpose of Expenditure
Phonebanking & Other
Voter Contact (Estim-
ate for 10/17/10 -
11/29/10)

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

Calendar Year-To-Date Per Election
for Office Sought 190953.36

Date
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Amount
62.49

Transaction ID: EDTEALC38

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	691.56
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Planned Parenthood Shasta-Diablo Action Fund

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

Mailing Address
2185 Pacheco Blvd.

Amount
244.78

City State Zip Code
Concord CA 94522

Transaction ID: EDTEALC59

Purpose of Expenditure
Phonebanking & Other
Voter Contact (10/30-
11/2/10)
Category/
Type 24E

Office Sought: House State: CA
 Senate District: _____
 Presidential

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

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 190953.36

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Political Data Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Mailing Address
825 South Victory Blvd.

Amount
632.04

City State Zip Code
Burbank CA 91502

Transaction ID: EDTEALC67

Purpose of Expenditure
Phone List
Category/
Type 24E

Office Sought: House State: CA
 Senate District: _____
 Presidential

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

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 190953.36

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	876.82
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Political Data Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Mailing Address
825 South Victory Blvd.

Amount
718.56

City State Zip Code
Burbank CA 91502

Transaction ID: EDTEALC68

Purpose of Expenditure
Phone List

Category/
Type 24E

Office Sought: House State: CA
 Senate District: _____
 Presidential

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

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 190953.36

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Political Data Inc.

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

Mailing Address
825 South Victory Blvd.

Amount
47.90

City State Zip Code
Burbank CA 91502

Transaction ID: EDTEALC66

Purpose of Expenditure
Poll Location Match

Category/
Type 24E

Office Sought: House State: CA
 Senate District: _____
 Presidential

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

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 190953.36

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	766.46
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

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

Mailing Address
4111 Sunset Blvd., Suite 342

Amount
780.00

City State Zip Code
Los Angeles CA 90029

Transaction ID: EDTEALC69

Purpose of Expenditure
Opinion Eds
Category/Type 24E

Office Sought: House State: CA
 Senate District: _____
 Presidential

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

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 190953.36

Disbursement For: Primary General
 Other (specify) : _____
2010

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

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

Mailing Address
147 Lexington Ave

Amount
131.25

City State Zip Code
Redwood City CA 94062

Transaction ID: EDTEALC47

Purpose of Expenditure
Film Clips
Category/Type 24E

Office Sought: House State: CA
 Senate District: _____
 Presidential

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

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 190953.36

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	911.25
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The Spoken Hub

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
1001 G Street, NW, Suite 400E

Amount
8000.00

City State Zip Code
Washington DC 20001

Transaction ID: EDTEALC28
Office Sought: House State: CA
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
Robo Calls 24E

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

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
190953.36

Disbursement For: Primary General
 Other (specify) : _____
2010

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

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

Mailing Address
167 Berkshire Court

Amount
9275.00

City State Zip Code
San Ramon CA 94582

Transaction ID: EDTEALC50
Office Sought: House State: CA
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
On-Line Ads 24E

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

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
190953.36

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	17275.00
(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.

Annie Lundahl
Signature

Date M M / D D / Y Y Y Y
1 2 / 0 2 / 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 C C00488502	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Paul Wittenberg		Date M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	
Mailing Address 167 Berkshire Court		Amount 1250.00	
City State Zip Code San Ramon CA 94582		Transaction ID: EDTEALC57	
Purpose of Expenditure On-Line Ads		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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Calendar Year-To-Date Per Election for Office Sought		190953.36	

(a) SUBTOTAL of Itemized Independent Expenditures	1250.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	175928.60
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 1 2 / 0 2 / 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)

<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Alliance Print & Design</p> <p>Mailing Address 930 R Street</p> <p>City Sacramento State CA Zip Code 95811</p> <p>Purpose of Disbursement State Activity Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB181</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2328.92</p> <p>011 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Alliance Print & Design</p> <p>Mailing Address 930 R Street</p> <p>City Sacramento State CA Zip Code 95811</p> <p>Purpose of Disbursement State Activity Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB188</p> <p>Date of Disbursement 11 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 53.75</p> <p>011 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Lindsay Beyerstein</p> <p>Mailing Address 315 Smith Street, Apt. 3</p> <p>City Brooklyn State NY Zip Code 11231</p> <p>Purpose of Disbursement State Election Activity Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB203</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2532.67

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 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

A. Full Name (Last, First, Middle Initial) Lindsay Beyerstein <hr/> Mailing Address 315 Smith Street, Apt. 3 <hr/> City Brooklyn State NY Zip Code 11231 <hr/> Purpose of Disbursement State Activity Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB189 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 300.00
	<input type="text" value="011"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Robert Brigham <hr/> Mailing Address 1415 Sheridan, #21 <hr/> City Chico State CA Zip Code 95926 <hr/> Purpose of Disbursement State Activity Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB132 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	<input type="text" value="011"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Continental Colorcraft <hr/> Mailing Address 1166 West Garvey <hr/> City Monterey State CA Zip Code 91754 <hr/> Purpose of Disbursement State Activity Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB159 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 799.96
	<input type="text" value="011"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	<input type="text" value="2099.96"/>
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

**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 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

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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) Feminist Majority <hr/> Mailing Address 433 S. Victory Blvd. <hr/> City State Zip Code Beverly Hills CA 90212 <hr/> Purpose of Disbursement State Activity Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB194 Date of Disbursement 11 / 17 / 2010 <hr/> Amount of Each Disbursement this Period 125.00
B.	Full Name (Last, First, Middle Initial) Ogilvy Public Relations Worldwide <hr/> Mailing Address 1414 K Street, Suite 300 <hr/> City State Zip Code Sacramento CA 95814 <hr/> Purpose of Disbursement State Activity Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB175 Date of Disbursement 10 / 16 / 2010 <hr/> Amount of Each Disbursement this Period 7000.00
C.	Full Name (Last, First, Middle Initial) Political Data Inc. <hr/> Mailing Address 825 South Victory Blvd. <hr/> City State Zip Code Burbank CA 91502 <hr/> Purpose of Disbursement State Activity Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB184 Date of Disbursement 11 / 03 / 2010 <hr/> Amount of Each Disbursement this Period 47.69

SUBTOTAL of Disbursements This Page (optional) ▶

7172.69

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 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

A.	Full Name (Last, First, Middle Initial) Progressive Victory <hr/> Mailing Address 4111 Sunset Blvd., Suite 342 <hr/> City Los Angeles State CA Zip Code 90029 <hr/> Purpose of Disbursement State Activity Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB191 Date of Disbursement 11 / 17 / 2010 <hr/> Amount of Each Disbursement this Period 780.00 <hr/> 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) TeleRoots Technologies, Inc. <hr/> Mailing Address 333 Washington Avenue, #100 <hr/> City Minneapolis State MN Zip Code 55401 <hr/> Purpose of Disbursement State Activity Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB127 Date of Disbursement 10 / 22 / 2010 <hr/> Amount of Each Disbursement this Period 6500.00 <hr/> 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) The Spoken Hub <hr/> Mailing Address 1001 G Street, NW, Suite 400E <hr/> City Washington State DC Zip Code 20001 <hr/> Purpose of Disbursement Robo Calls Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB180 Date of Disbursement 10 / 22 / 2010 <hr/> Amount of Each Disbursement this Period 6.03 <hr/> Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

7286.03

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)

PAGE 55 / 58

<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

A.	Full Name (Last, First, Middle Initial) Paul Wittenberg	Transaction ID: EXPB128 Date of Disbursement 10 / 21 / 2010
	Mailing Address 167 Berkshire Court	Amount of Each Disbursement this Period 9275.00
	City San Ramon State CA Zip Code 94582	
	Purpose of Disbursement State Activity Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Paul Wittenberg	Transaction ID: EXPB136 Date of Disbursement 10 / 29 / 2010
	Mailing Address 167 Berkshire Court	Amount of Each Disbursement this Period 1250.00
	City San Ramon State CA Zip Code 94582	
	Purpose of Disbursement State Activity Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

10525.00

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

29616.35

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 56 / 58
	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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planet Kelly	Nature of Debt (Purpose): Mailer
Mailing Address 2425 Meadowbrook Road	
City State ZIP Code Sacramento CA 95825	

Outstanding Balance Beginning This Period 29944.98	Transaction ID: PAYD1	
Amount Incurred This Period 0.00	Payment This Period 29944.98	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planet Kelly	Nature of Debt (Purpose): Mailer
Mailing Address 2425 Meadowbrook Road	
City State ZIP Code Sacramento CA 95825	

Outstanding Balance Beginning This Period 28571.76	Transaction ID: PAYD46	
Amount Incurred This Period 0.00	Payment This Period 28571.76	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planet Kelly	Nature of Debt (Purpose): Shipping for Mailers
Mailing Address 2425 Meadowbrook Road	
City State ZIP Code Sacramento CA 95825	

Outstanding Balance Beginning This Period 2500.00	Transaction ID: PAYD138	
Amount Incurred This Period 0.00	Payment This Period 2500.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	0.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 57 / 58	
	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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planned Parenthood Affiliates of California	Nature of Debt (Purpose): Voter Contact
Mailing Address 555 Capitol Mall, Suite 510	
City State ZIP Code Sacramento CA 95814	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: PAYD158	
Amount Incurred This Period <input type="text" value="1000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Data Inc.	Nature of Debt (Purpose): State Election Activities
Mailing Address 825 South Victory Blvd.	
City State ZIP Code Burbank CA 91502	

Outstanding Balance Beginning This Period <input type="text" value="7000.00"/>	Transaction ID: PAYD70	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7000.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="8000.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="8000.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="8000.00"/>

A. Form/Schedule : **SD10**

(Estimate for 10/29/10 - 11/2/10)

Transaction ID : **PAYD158**