10/17/2014 21 : 55

PAGE 1/5

#### FEC FORM 5

#### REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

(a) Name of Individual, Organization or Corporation Planned Parenthood Advocates Mar Mon	ite	
(b) Address (number and street) check if different to the check if	than previously reported	
(c) City, State and ZIP Code San Jose CA 95126		3. FEC Identification Number
2. Occupation and Name of Employer (for Individual Filers O	Only)	C C90007311
4. TYPE OF REPORT (check appropriate boxed)  (a) April 15 Quarterly Report  July 15 Quarterly Report  October 15 Quarterly Report  January 31 Year-End Report  b) Is this Report an amendment? No.  5. COVERING PERIOD:  FROM  THROUGH  THROUGH		
TOTAL CONTRIBUTIONS      TOTAL INDEPENDENT EXPENDITURES		180.56 5238.25
Under penalty of perjury I certify that the independent expenditures report of, any candidate or authorized committee or agent of either, or any po		ı, or concert with, or at the request or suggestion
TYPE OR PRINT NAME OF PERSON COMPLETING FORM	[El	DATE ectronically Filed]
Liz Figueroa	Liz Figueroa	10/17/2014
NOTE: Submission of false, erroneous or incomplete inf	formation may subject the person signing this report t	o the penalties of 2 U.S.C. §437g.

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

# SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE 2 OF 5

	1011	
	and Statements may not be sold or used by any peng the name and address of any political committee	
NAME OF FILER (In Full) Planned Parenthood Advocates Mar Mont	de	
A. Full Name (Last, First, Middle Initial)		2
	of Planned Parenthood Affiliates of California	Date of Receipt
Mailing Address 555 Capitol Mall, Suite 14	125	10 16 2014
City	State Zip Code	Transaction ID : NONC228
Sacramento	CA 95814	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.56
Name of Employer	Occupatio	n
3. Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project	of Planned Parenthood Affiliates of California	Date of Descript
Mailing Address 555 Capitol Mall, Suite		Date of Receipt
		10 16 2014
City	State Zip Code	Transaction ID : NONC231
Sacramento	CA 95814	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	170.00
Name of Employer	Occupation	n
Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	7 Sant of Each receipt this Period
Name of Employer	Occupation	n
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y M Y M Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	
Name of Employer	Occupation	n
SUBTOTAL of Receipts This Page (optional	N)	▶ 180.56
TOTAL This Period (last page carry total to	Line 6)	▶ 180.56

## SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 5 FOR LINE 7 OF FORM 5

AME OF FILER (In Full)						
Planned Parenthood Advocates Mar Monte						
Full Name (Last, First, Middle Initial) of Pa	-			Date of Pu	ublic Distribution/	Dissemination
Planned Parenthood Advocates Mar Mont	:e			M M M	/ D D /	2014
Mailing Address 1605 The Alameda					٠٠٠	2011
				Amount		
City	State	Zip Code			4	2625.00
San Jose	CA	95126			ion ID : EDTEAL	
Purpose of Expenditure Staff Time; 10/16 - 10/31 (estimate)		Category/ Type 0	003 C	Office Sought:	X House Senate	State: CA District: 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expenditu	ure:	С	Check One:	President  Support	Oppose
C. I. V. T. Bata Bas Floation			D	isbursement Fo	or: Primary	X General
Calendar Year-To-Date Per Election for Office Sought		35927.8		2014	(specify)	
Full Name (Last, First, Middle Initial) of Page 1	ayee			Date of Pu	ublic Distribution/	Dissemination
Planned Parenthood Advocates Mar Monte	:e			M M		YIYIYIY
Mailing Address 1605 The Alameda				10	16	2014
City	State	Zip Code		7.11100		
San Jose	CA	95126		Transoti	TO FOTEAL	76.00
Purpose of Expenditure		Category/		Transacti  Office Sought:	ion ID : EDTEAL	C A
Copies for Phone Banking; 10/16 - 10/31 (		Type 00	01	Лпоо осту.	Senate President	State: CA District: 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expendition	ure:	С	Check One:	X Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		35927.8		isbursement Fo 2014 Other	or: Primary (specify)	Meneral General
Full Name (Last, First, Middle Initial) of Pa	'ayee		l	Date of Pu	ublic Distribution/	Dissemination
Planned Parenthood Advocates Mar Mont	te			M - M		YIYIY
Mailing Address 1605 The Alameda				10	16	2014
1000				Amount		
City	State	Zip Code		<b>-</b>		990.00
San Jose	CA	95126		Transacti	ion ID : EDTEAL	
Purpose of Expenditure		Category/	0	office Sought:	X House	State: CA
Food & Expenses for Phone Banking; 10/  Name of Federal Candidate Supported or		Type 0	003		Senate President	District: 07
Ami Bera	——————————————————————————————————————		С	heck One:	Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		35927.8		isbursement Fo 2014 Other	or: Primary (specify)	General
(a) SUBTOTAL of Itemized Independent E	Expenditures			<b>-</b>	, , , , , , , , , , , , , , , , , , ,	3691.00
(b) SUBTOTAL of Unitemized Independent	t Expenditures			<b>-</b>	, , , , ,	
(c) TOTAL Independent Expenditures (carry total from last page forwar				<b>-</b>		

## SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 4 OF 5 FOR LINE 7 OF FORM 5

AME OF FILER (In Full)							
Planned Parenthood Advocates Mar Monte							
Full Name (Last, First, Middle Initial) of Pag	yee			Date	e of Publi	ic Distribution/l	Dissemination
Planned Parenthood Advocates Mar Monte					M M M 10	/ D D / 16	2014
Mailing Address 1605 The Alameda				Amo		٠٠٠	2017
City	State	Zip Code			June		
San Jose	CA	2ip Code 95126		Tra	nsaction	n ID : EDTEAL	111.69 <b>C294</b>
Purpose of Expenditure Staff Time for Social Media; 10/16 - 10/31		Category/ Type	004	Office Sou	_	X House Senate	State: CA  District: 07
Name of Federal Candidate Supported or C Ami Bera	Opposed by Expende	iture:		Check On	ne:	President  Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		359	927.86	Disbursem	nent For: 2014 Other (sp		General
Full Name (Last, First, Middle Initial) of Page	yee			Date	e of Publi	ic Distribution/l	Dissemination
Planned Parenthood Affiliates of California					M = M	/ D D /	Y
Mailing Address 555 Capitol Mall, Suite 51	0			Amo	10 ount	16	2014
City	State	Zip Code			Juni		
Sacramento	CA	95814		ا ا			170.00
Purpose of Expenditure		1		Office Sou		NID: EDTEAL	C A
Staff Time; 10/16 - 10/31 (estimate)		Category/ Type	001	Unice occ	ugni.	Senate	State: 07 District: 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expend	iture:		Check On	ne:	President Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		35	927.86	Disbursem	nent For: 2014 Other (sp		General General
Full Name (Last, First, Middle Initial) of Pay	vee					ic Distribution/	Dissemination
Planned Parenthood Affiliates of California					M M M	/ 010 /	2014
Mailing Address 555 Capitol Mall, Suite 5	10			Amo		10	201-7
City	State	Zip Code		-			
Sacramento	CA	95814		Tra	tior	ID : EDTEAL	10.56
Purpose of Expenditure		Category/		Office Sou	-	House	State: CA
Online Voter Guide; 10/16 - 10/31 (estimate	<u>,                                      </u>	Туре	004	-		Senate	District: 07
Name of Federal Candidate Supported or ( Ami Bera	Opposed by Expend	iture:		Check On	ie:	President  Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		359	927.86	Disbursem	nent For: 2014 Other (sp		General
(a) SUBTOTAL of Itemized Independent Ex	penditures						292.25
(b) SUBTOTAL of Unitemized Independent	Expenditures				7		
(c) TOTAL Independent Expenditures (carry total from last page forward				▶			

#### SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 5 OF 5 FOR LINE 7 OF FORM 5

AME OF FILED (In Full)		
AME OF FILER (In Full) Planned Parenthood Advocates Mar Mor	nte	
Full Name (Lant First Middle India)	of Davis	
Full Name (Last, First, Middle Initial)		Date of Public Distribution/Dissemination
Progressive Contact Technologies, In  Mailing Address P.O. Box 59570	nc.	10 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
P.O. BOX 59570		Amount
City	State Zip Code	1355.00
Norwalk	CA 90652	1255.00 Transaction ID : EDTEALC289
Purpose of Expenditure Phone Banking; 10/16 - 10/31 (estimate)	ate) Category/ Type 003	Office Sought: X House State: CA Senate District: 07
Name of Federal Candidate Support Ami Bera	ted or Opposed by Expenditure:	President  Check One: Support Oppose
Calendar Year-To-Date Per Ele	otion	Disbursement For: Primary General
for Office So	25027.06	Other (specify)
Full Name (Last, First, Middle Initial)	of Payee	Date of Public Distribution/Dissemination
Mailing Address		M = M / D = D / Y = Y = Y
Mailing Address		Amount
City	State Zip Code	
D		
Purpose of Expenditure	Category/ Type	Office Sought: House State: Senate
Name of Federal Candidate Support	ted or Opposed by Expenditure:	President District:  Check One: Support Oppose
Calendar Year-To-Date Per Elec	tion	Disbursement For: Primary General
for Office Sou		Other (specify)
Full Name (Last, First, Middle Initial)	of Payee	Date of Public Distribution/Dissemination
		M = M / D = D / Y = Y = Y
Mailing Address		Amount
-011	7.0.4	Amount
City	State Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: House State:
Name of Federal Candidate Support		Senate District:
	, r	Check One: Support Oppose
Calendar Year-To-Date Per Elec		Disbursement For: Primary General
for Office Sou	ught	Other (specify)
(a) SUBTOTAL of Itemized Independ	ent Expenditures	1255.00
		1200.00
(b) SUBTOTAL of Unitemized Indepe	endent Expenditures	
(c) TOTAL Independent Expenditures (carry total from last page for	sforward to Line 7)	5238.25
,,	· · · · · · · · · · · · · · · · · · ·	