

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

Planned Parenthood Votes

ADDRESS (number and street)

123 William St, 10th Floor

Check if different than previously reported. (ACC)

New York

NY

10038

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00489799

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on

MM / DD / YYYY

in the State of

State

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

MM / DD / YYYY

in the State of

State

5. Covering Period

MM / DD / YYYY 11 / 29 / 2016

through

MM / DD / YYYY 12 / 31 / 2016

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

Hubbard, Tshombe, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

MM / DD / YYYY 01 / 31 / 2017

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

Office Use Only

FEC FORM 3X Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Planned Parenthood Votes

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		1143446.70
(b) Cash on Hand at Beginning of Reporting Period.....	926111.60	
(c) Total Receipts (from Line 19)	87100.00	21043958.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1013211.60	22187405.68
7. Total Disbursements (from Line 31).....	263221.97	21437416.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	749989.63	749989.63
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)	434629.18	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Planned Parenthood Votes

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	87000.00	17146269.54
(ii) Unitemized	100.00	11310.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	87100.00	17157579.54
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3736020.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	87100.00	20893599.54
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	8109.31
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	142250.13
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	87100.00	21043958.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	87100.00	21043958.98

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	141253.70	3319487.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	141253.70	3319487.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1893034.37
24. Independent Expenditures (use Schedule E)	110218.27	12503556.83
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1000000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1000000.00
29. Other Disbursements (Including Non-Federal Donations).....	11750.00	2721337.30
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	263221.97	21437416.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	263221.97	21437416.05

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	87100.00	20893599.54
34. Total Contribution Refunds (from Line 28(d))	0.00	1000000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	87100.00	19893599.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	141253.70	3319487.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	141253.70	3319487.55

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 25
	<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	

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)
Planned Parenthood Votes

A. Berwind, Jeanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Whitney Farm Lane
 City Harvard State MA Zip Code 01451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2877079
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Brorsen, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 Elm Rock Road
 City Bronxville State NY Zip Code 10708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2016
Transaction ID : A2016-2877077
 Amount of Each Receipt this Period
 25000.00
 Memo Item

C. Burns, Sanford, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 E 71st Street #17j
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stifel Nicolas Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2877081
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	26500.00
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: (check only one)	PAGE 7 OF 25
	<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)
Planned Parenthood Votes

A. Koppelman, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1882 Columbia Road NW #201
 City Washington State DC Zip Code 20009-5137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2016
Transaction ID : A2016-2877078
 Amount of Each Receipt this Period
 10000.00
 Memo Item

B. Schroedl, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4910 SE 35th Avenue
 City Portland State OR Zip Code 97202-4114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2016
Transaction ID : A2016-2877080
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Schultz, Jamie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9006 Green Oaks Circle
 City Dallas State TX Zip Code 75243-7212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2877076
 Amount of Each Receipt this Period
 50000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	60500.00
TOTAL This Period (last page this line number only).....▶	87000.00

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Catalyst LLC

Mailing Address 1090 Vermont Ave./Ste. 300

City Washington State DC Zip Code 20006

Purpose of Disbursement Database Services

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B640201

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Precision Strategies LLC

Mailing Address 901 New York Avenue NW/Ste. 530

City Washington State DC Zip Code 20001

Purpose of Disbursement Communications Consulting

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B640203

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Premier Global Services

Mailing Address 3280 Peachtree Road NE, Suite 1000

City Atlanta State G3 Zip Code 30305

Purpose of Disbursement Teleconferencing Services

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B640206

Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Premier Global Services

Mailing Address 3280 Peachtree Road NE, Suite 1000

City Atlanta State G3 Zip Code 30305

Purpose of Disbursement
Teleconferencing Services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 22 / 2016

FEC Identification Number

C
Transaction ID : B640211
Amount of Each Disbursement this Period
32.83

Memo Item

Full Name (Last, First, Middle Initial)

B. Civis Analytics

Mailing Address PO Box 4042

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Database Services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 09 / 2016

FEC Identification Number

C
Transaction ID : B640200
Amount of Each Disbursement this Period
962.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Civis Analytics

Mailing Address PO Box 4042

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Database Services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 30 / 2016

FEC Identification Number

C
Transaction ID : B640205
Amount of Each Disbursement this Period
962.00

Memo Item

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

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

1956.83

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Rath, Young and Pignatelli PC

Mailing Address 1 Capital Plaza

City
Conford

State
NH

Zip Code
03301

Purpose of Disbursement
Legal Consulting

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			22			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : B640210

Amount of Each Disbursement this Period

[REDACTED] 167.50

Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund Inc.

Mailing Address 123 William St, 10th Floor

City
New York

State
NY

Zip Code
10038

Purpose of Disbursement
Reimbursement for Program Staff time

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			01			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : B640198

Amount of Each Disbursement this Period

[REDACTED] 101163.44

Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund Inc.

Mailing Address 123 William St, 10th Floor

City
New York

State
NY

Zip Code
10038

Purpose of Disbursement
Reimbursement for Program Staff time

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			27			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : B640202

Amount of Each Disbursement this Period

[REDACTED] 8693.99

Memo Item

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

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

[REDACTED] 110024.93

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial) A. Franciska Farkas Creative		Date of Disbursement MM / DD / YYYY 12 / 30 / 2016	
Mailing Address 102 Clinton Ave.		FEC Identification Number C [REDACTED] Transaction ID : B640204 Amount of Each Disbursement this Period [REDACTED] 700.00	
City Brooklyn	State NY	Zip Code 11205	Category/ Type 001
Purpose of Disbursement Videography and Photography		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Federal Express		Date of Disbursement MM / DD / YYYY 12 / 08 / 2016	
Mailing Address PO Box 1140		FEC Identification Number C [REDACTED] Transaction ID : B640207 Amount of Each Disbursement this Period [REDACTED] 618.90	
City Memphis	State TN	Zip Code 38101	Category/ Type 001
Purpose of Disbursement Shipping for non-candidate specific promotional materials		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Federal Express		Date of Disbursement MM / DD / YYYY 12 / 20 / 2016	
Mailing Address PO Box 1140		FEC Identification Number C [REDACTED] Transaction ID : B640209 Amount of Each Disbursement this Period [REDACTED] 299.06	
City Memphis	State TN	Zip Code 38101	Category/ Type 001
Purpose of Disbursement Shipping for non-candidate specific promotional materials		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1617.96
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

A. Bank of America

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement Merchant Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: District: Not Applicable

Date of Disbursement: 12 / 02 / 2016

FEC Identification Number: C

Transaction ID : B640199

Amount of Each Disbursement this Period: 248.40

Memo Item

B. Public Affairs Support Services Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 1950 Roland Clarke Place Suite 300

City Reston State VA Zip Code 20191

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District: Not Applicable

Date of Disbursement: 12 / 08 / 2016

FEC Identification Number: C

Transaction ID : B640208

Amount of Each Disbursement this Period: 26358.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	26606.40
TOTAL This Period (last page this line number only).....▶	141253.70

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MackCrouse Group			Nature of Debt (Purpose): Canvass literature
Mailing Address 2001 N. Beauregard St. Ste 420			
City Alexandria	State VA	Zip Code 22311	

Outstanding Balance Beginning This Period <input type="text" value="3950.00"/>	Transaction ID : D439020	
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="3950.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SKDKnickerbocker LLC			Nature of Debt (Purpose): Production Fees: Television Advertisement
Mailing Address 1150 18th Street NW/Ste. 800			
City Washington	State DC	Zip Code 20036	

Outstanding Balance Beginning This Period <input type="text" value="55060.00"/>	Transaction ID : D439027	
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="55060.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Itzamna Translations Company			Nature of Debt (Purpose): Translation services. Note correction to beginning debt amt.
Mailing Address P.O. Box 1015			
City Glendale	State AZ	Zip Code 85311	

Outstanding Balance Beginning This Period <input type="text" value="63.39"/>	Transaction ID : D439030	
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="63.39"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="59073.39"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alliance Marketing Distributor Inc.			Nature of Debt (Purpose): Printing of postcards and posters.
Mailing Address 133 Industrial Ave.			
City Hasbrouck Heights	State NJ	Zip Code 07604	

Outstanding Balance Beginning This Period 884.58	Transaction ID : D439032	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 884.58

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Network Solutions			Nature of Debt (Purpose): Purchase of domain name.
Mailing Address 13861 Sunrise Valley Dr. #300			
City Herndon	State VA	Zip Code 20171	

Outstanding Balance Beginning This Period 15.99	Transaction ID : D439033	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Terris Barnes & Walters			Nature of Debt (Purpose): Canvass Lit-Estimated costs.
Mailing Address 400 Montgomery St # 700			
City San Francisco	State CA	Zip Code 94104	

Outstanding Balance Beginning This Period 31913.07	Transaction ID : D439041	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 31913.07

1) SUBTOTALS This Period This Page (optional)..... ▶	32813.64
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 15 OF 25
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Pivot Group			Nature of Debt (Purpose): Canvassing Lit. See Schedule E
Mailing Address 1720 I Street NW Suite 550			
City Washington	State DC	Zip Code 20005	

Outstanding Balance Beginning This Period 11750.00	Transaction ID : D439043	
Amount Incurred This Period 0.00	Payment This Period 11750.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Journeyman Press			Nature of Debt (Purpose): Canvassing Lit.
Mailing Address 11 Malcolm Hoyt Dr.			
City Newburyport	State MA	Zip Code 01950	

Outstanding Balance Beginning This Period 1263.00	Transaction ID : D439044	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1263.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor FedEx Print Center			Nature of Debt (Purpose): Canvassing Lit. See Schedule E
Mailing Address 3 Colby Ct.			
City Bedford	State NH	Zip Code 03110	

Outstanding Balance Beginning This Period 1716.26	Transaction ID : D439045	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1716.26

1) SUBTOTALS This Period This Page (optional)..... ▶	2979.26
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 16 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Blueprint Interactive			Nature of Debt (Purpose): Online Advertising.
Mailing Address 2229 North Pollard St			
City Arlington	State VA	Zip Code 22207	

Outstanding Balance Beginning This Period 116950.00	Transaction ID : D439047	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 166950.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Franciska Farkas			Nature of Debt (Purpose): Digital Ad Production. See Schedule E
Mailing Address 102 Clinton Ave.			
City Brooklyn	State NY	Zip Code 11205	

Outstanding Balance Beginning This Period 11000.00	Transaction ID : D439049	
Amount Incurred This Period 0.00	Payment This Period 4500.00	Outstanding Balance at Close of This Period 6500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Priorities USA			Nature of Debt (Purpose): Digital Ad Production. See Schedule E
Mailing Address 601 13th Street NW Suite 610N			
City Washington	State DC	Zip Code 20005	

Outstanding Balance Beginning This Period 10000.00	Transaction ID : D439050	
Amount Incurred This Period 0.00	Payment This Period 10000.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	173450.00
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 17 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Viridiana Vidal Gonzzali			Nature of Debt (Purpose): Media Consulting. See Schedule E
Mailing Address 4012 Linniki Street			
City North Las Vegas	State NV	Zip Code 89032	

Outstanding Balance Beginning This Period 20000.00	Transaction ID : D439051	
Amount Incurred This Period 0.00	Payment This Period 20000.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mission Control LLC			Nature of Debt (Purpose): Canvass Lit.
Mailing Address 624 Hebron Ave #200			
City Glastonbury	State CT	Zip Code 06033	

Outstanding Balance Beginning This Period 22189.00	Transaction ID : D439052	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22189.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Work for Progress Inc			Nature of Debt (Purpose): Canvassing. See Schedule E
Mailing Address 1543 Wazee St #440			
City Denver	State CO	Zip Code 80202	

Outstanding Balance Beginning This Period 91170.00	Transaction ID : D439053	
Amount Incurred This Period 0.00	Payment This Period 49286.85	Outstanding Balance at Close of This Period 41883.15

1) SUBTOTALS This Period This Page (optional)..... ▶	64072.15
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 18 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 76 Words		Nature of Debt (Purpose): Online Video Production. See Schedule E	
Mailing Address 1806 Vernon St, NW #300			
City Washington	State DC	Zip Code 20009	

Outstanding Balance Beginning This Period	Transaction ID : D439056	
23465.07		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	14671.42	8793.65

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ib5k, LLC		Nature of Debt (Purpose): Online video production.	
Mailing Address 343 Carl Street			
City San Francisco	State CA	Zip Code 94117	

Outstanding Balance Beginning This Period	Transaction ID : D439064	
35000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	35000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planned Parenthood Action Fund Inc.		Nature of Debt (Purpose): Staff time.	
Mailing Address 123 William St, 10th Floor			
City New York	State NY	Zip Code 20038	

Outstanding Balance Beginning This Period	Transaction ID : D439070	
34658.41		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	34658.41

1) SUBTOTALS This Period This Page (optional)..... ▶	78452.06
2) TOTALS This Period (last page this line number only)..... ▶	410840.50
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	410840.50

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee: Priorities USA
Mailing Address: 601 13th Street NW Suite 610N
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Digital Ad Production
Category/Type: 004
Name of Federal Candidate: Trump, Donald, ,
Office Sought: President
Disbursement For: General 2016
Amount: 5000.00
Transaction ID: B632153
Date of Disbursement or Obligation: 12/06/2016
Calendar Year-To-Date Per Election for Office Sought: 4305704.37

Full Name of Payee: Priorities USA
Mailing Address: 601 13th Street NW Suite 610N
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Digital Ad Production
Category/Type: 004
Name of Federal Candidate: Trump, Donald, ,
Office Sought: President
Disbursement For: General 2016
Amount: 5000.00
Transaction ID: B633545
Date of Disbursement or Obligation: 12/06/2016
Calendar Year-To-Date Per Election for Office Sought: 4305704.37

(a) SUBTOTAL of Itemized Independent Expenditures: 10000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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.

Hubbard, Tshombe, ,

[Electronically Filed]

Date

01 / 31 / 2017

Signature

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

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00489799 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item 76 Words	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> / / </div>
Mailing Address 1806 Vernon Street, Ste. #100	Amount <div style="border: 1px solid black; padding: 2px;"> / / </div>
City Washington State DC Zip Code 20009	Transaction ID : B632150 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> / / </div>
Purpose of Expenditure Digital Ad Production Category/Type 004	Name of Federal Candidate: Heck, Joseph, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought / / 1944405.69	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item 76 Words	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> / / </div>
Mailing Address 1806 Vernon Street, Ste. #100	Amount <div style="border: 1px solid black; padding: 2px;"> / / </div>
City Washington State DC Zip Code 20009	Transaction ID : B632152 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> / / </div>
Purpose of Expenditure Digital Ad Production Category/Type 004	Name of Federal Candidate: Cortez-Masto, Catherine, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought / / 1944405.69	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> / / </div> 8248.53
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> / / </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> / / </div>

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.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

 / /
01 / 31 / 2017

Signature

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

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item 76 Words	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 10 / 2016</div>			
Mailing Address 1806 Vernon Street, Ste. #100	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">6422.89</div>			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Washington</td> <td style="width:17%;">State DC</td> <td style="width:50%;">Zip Code 20009</td> </tr> </table>		City Washington	State DC	Zip Code 20009
City Washington		State DC	Zip Code 20009	
Purpose of Expenditure Digital Ad Production				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Toomey, Pat, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: PA			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">2667767.46</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item Viridiana Vidal Gonzzali	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 18 / 2016</div>			
Mailing Address 4012 Linniki Street	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">5000.00</div>			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City North Las Vegas</td> <td style="width:17%;">State NV</td> <td style="width:50%;">Zip Code 89032</td> </tr> </table>		City North Las Vegas	State NV	Zip Code 89032
City North Las Vegas		State NV	Zip Code 89032	
Purpose of Expenditure Media Consulting				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Heck, Joseph, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: NV			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">1944405.69</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">11422.89</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>

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.

Signature Hubbard, Tshombe, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
01 / 31 / 2017

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

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Viridiana Vidal Gonzzali	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 18 / 2016</div>			
Mailing Address 4012 Linniki Street	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">5000.00</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City North Las Vegas</td> <td style="width:17%; padding: 2px;">State NV</td> <td style="width:50%; padding: 2px;">Zip Code 89032</td> </tr> </table>		City North Las Vegas	State NV	Zip Code 89032
City North Las Vegas		State NV	Zip Code 89032	
Purpose of Expenditure Media Consulting				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Trump, Donald, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>			
Calendar Year-To-Date Per Election for Office Sought 4305704.37	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item Viridiana Vidal Gonzzali	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 18 / 2016</div>			
Mailing Address 4012 Linniki Street	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">5000.00</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City North Las Vegas</td> <td style="width:17%; padding: 2px;">State NV</td> <td style="width:50%; padding: 2px;">Zip Code 89032</td> </tr> </table>		City North Las Vegas	State NV	Zip Code 89032
City North Las Vegas		State NV	Zip Code 89032	
Purpose of Expenditure Media Consulting				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>			
Calendar Year-To-Date Per Election for Office Sought 4305704.37	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">10000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>

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.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

01 / 31 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee: Viridiana Vidal Gonzzali
Mailing Address: 4012 Linniki Street
City: North Las Vegas, State: NV, Zip Code: 89032
Purpose of Expenditure: Media Consulting
Category/Type: 004
Date of Public Distribution/Dissemination: 10/18/2016
Amount: 5000.00
Transaction ID: B633544
Date of Disbursement or Obligation: 12/21/2016

Name of Federal Candidate: Cortez-Masto, Catherine,
Support/Oppose: Support
Office Sought: Senate
State: NV
Calendar Year-To-Date Per Election for Office Sought: 1944405.69
Disbursement For: General 2016

Full Name of Payee: Work for Progress Inc
Mailing Address: 1543 Wazee St #440
City: Denver, State: CO, Zip Code: 80202
Purpose of Expenditure: Canvassing-actual amount lower than estimate
Category/Type: 007
Date of Public Distribution/Dissemination: 10/29/2016
Amount: 24648.42
Transaction ID: B634533
Date of Disbursement or Obligation: 12/22/2016

Name of Federal Candidate: Coffman, Mike,
Support/Oppose: Oppose
Office Sought: House
State: CO
Calendar Year-To-Date Per Election for Office Sought: 35648.42
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 29648.42
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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.

Hubbard, Tshombe, ,

[Electronically Filed]

Date 01/31/2017

Signature

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

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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Check if 24-hour report 48-hour report ➤ New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item Work for Progress Inc	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2016						
Mailing Address 1543 Wazee St #440	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">24648.43</div> Transaction ID : B634538 Date of Disbursement or Obligation MM / DD / YYYY 12 / 22 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Denver</td> <td>CO</td> <td>80202</td> </tr> </table>		City	State	Zip Code	Denver	CO	80202
City		State	Zip Code				
Denver	CO	80202					
Purpose of Expenditure Canvassing-actual amount lower than estimate							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Trump, Donald, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>						
Calendar Year-To-Date Per Election for Office Sought 4305704.37	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item Franciska Farkas	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016						
Mailing Address 102 Clinton Ave.	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4500.00</div> Transaction ID : B633546 Date of Disbursement or Obligation MM / DD / YYYY 12 / 27 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Brooklyn</td> <td>NY</td> <td>11205</td> </tr> </table>		City	State	Zip Code	Brooklyn	NY	11205
City		State	Zip Code				
Brooklyn	NY	11205					
Purpose of Expenditure Ad Production							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Trump, Donald, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>						
Calendar Year-To-Date Per Election for Office Sought 4305704.37	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">29148.43</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

MM / DD / YYYY
01 / 31 / 2017

Signature

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

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
--	--

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item The Pivot Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016						
Mailing Address 1720 I Street NW Suite 550	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 5875.00 </div> Transaction ID : B633535 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 01 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005</td> </tr> </table>		City	State	Zip Code	Washington	DC	20005
City		State	Zip Code				
Washington	DC	20005					
Purpose of Expenditure Canvass Lit-final payment							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>						
Calendar Year-To-Date Per Election for Office Sought 4308940.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item The Pivot Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016						
Mailing Address 1720 I Street NW Suite 550	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 5875.00 </div> Transaction ID : B633536 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 01 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005</td> </tr> </table>		City	State	Zip Code	Washington	DC	20005
City		State	Zip Code				
Washington	DC	20005					
Purpose of Expenditure Canvass Lit-final payment							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Cortez-Masto, Catherine, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>NV</u>						
Calendar Year-To-Date Per Election for Office Sought 1943906.45	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 11750.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 110218.27 </div>

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.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 01 / 31 / 2017

Signature