

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) 434 West 33rd Street

Check if different than previously reported. (ACC) New York NY 10001

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00489799

3. IS THIS REPORT NEW OR AMENDED (N) (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 08/01/2014 through 08/31/2014

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 Aaron Samulcek

Signature of Treasurer Aaron Samulcek [Electronically Filed] Date 10/15/2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2014"/>	<input type="text" value="367024.11"/>	<input type="text" value="367024.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1844811.08"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="227403.29"/>	<input type="text" value="2708182.24"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="2072214.37"/>	<input type="text" value="3075206.35"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="351814.09"/>	<input type="text" value="1354806.07"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1720400.28"/>	<input type="text" value="1720400.28"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="150235.34"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

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).....	226653.29	2699635.92
(ii) Unitemized	750.00	1546.32
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	227403.29	2701182.24
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	227403.29	2703182.24
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	5000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	227403.29	2708182.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	227403.29	2708182.24

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	165198.34	399697.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	165198.34	399697.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	86926.64	232066.34
25. Coordinated Party Expenditures (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	5146.32
(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	5146.32
29. Other Disbursements	99689.11	717896.03
30. Federal Election Activity (2 U.S.C. §431(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)) ..	351814.09	1354806.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	351814.09	1354806.07

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	227403.29	2703182.24
34. Total Contribution Refunds (from Line 28(d))	0.00	5146.32
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	227403.29	2698035.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	165198.34	399697.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	165198.34	399697.38

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This amendment is being filed to disclose an additional in-kind receipt and corresponding expense on lines 11a and 21b respectively. Please update your records accordingly.

Form/Schedule:
Transaction ID:

**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 58
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Nancy H Bagley
Full Name (Last, First, Middle Initial)

Mailing Address 1235 8th Avenue West

City State Zip Code
Seattle WA 98119

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 12 / 2014
Transaction ID : A2014-2105161

Amount of Each Receipt this Period
1000.00

B. Bruce Berger
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 482

City State Zip Code
Aspen CO 81612

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

Name of Employer Occupation
Self - Employed Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 12 / 2014
Transaction ID : A2014-2105162

Amount of Each Receipt this Period
1000.00

C. Richard Brennan
Full Name (Last, First, Middle Initial)

Mailing Address 1105 Urban Ave

City State Zip Code
Durham NC 27701

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

Name of Employer Occupation
Duke University Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 12 / 2014
Transaction ID : A2014-2105164

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
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 OF 58
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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. Wendy Chavkin
Full Name (Last, First, Middle Initial)

Mailing Address 46 Louse Point Road

City East Hampton State NY Zip Code 11937

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

Name of Employer Columbia University Occupation Doctor

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
 08 / 07 / 2014
Transaction ID : A2014-2105165

Amount of Each Receipt this Period
 1000.00

B. Kristi Cumming
Full Name (Last, First, Middle Initial)

Mailing Address 1115 West Old Ranch Road

City Park City State UT Zip Code 84098

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

Name of Employer None Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2014
Transaction ID : A2014-2105166

Amount of Each Receipt this Period
 2500.00

C. Kathleen Doyle
Full Name (Last, First, Middle Initial)

Mailing Address 1115 5th Avenue

City New York State NY Zip Code 10128

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

Name of Employer Doyle New York Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2014
Transaction ID : A2014-2105167

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 8500.00

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 9 OF 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)
Planned Parenthood Votes

A. Mr. Lamnot du Pont III
 Full Name (Last, First, Middle Initial)
 Mailing Address 846 River Ranch Court
 City Fruita State CO Zip Code 81521-8436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self - Employed Rancher
 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
 08 / 12 / 2014
Transaction ID : A2014-2105168
 Amount of Each Receipt this Period
 500.00

B. George Fertitta
 Full Name (Last, First, Middle Initial)
 Mailing Address 1148 Fifth Avenue, #6A
 City New York State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Bloomberg Association Consultant
 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
 08 / 04 / 2014
Transaction ID : A2014-2105169
 Amount of Each Receipt this Period
 1000.00

C. Kerry Golden
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Greene Street #5
 City New York State NY Zip Code 10012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 KG Executor & Estate Services Lawyer
 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
 08 / 18 / 2014
Transaction ID : A2014-2105170
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
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 10 OF 58
	<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. Alice Horton
Full Name (Last, First, Middle Initial)
Mailing Address 4900 W. Cornwallis Road
City Durham State NC Zip Code 27705
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **500.00**

Date of Receipt **08 / 15 / 2014**
Transaction ID : A2014-2105171
Amount of Each Receipt this Period **500.00**

B. Ms. Christine Huber
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Hill Street
City Durham State NC Zip Code 27707
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **2000.00**

Date of Receipt **08 / 18 / 2014**
Transaction ID : A2014-2105172
Amount of Each Receipt this Period **2000.00**

C. Elynn Lindsay
Full Name (Last, First, Middle Initial)
Mailing Address 9323 Duxbury Road
City Los Angeles State CA Zip Code 90034
FEC ID number of contributing federal political committee. **C**
Name of Employer US Attorney's Office - CA Occupation Assistant US Attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **100000.00**

Date of Receipt **08 / 19 / 2014**
Transaction ID : A2014-2105173
Amount of Each Receipt this Period **100000.00**

SUBTOTAL of Receipts This Page (optional)..... **102500.00**
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 11 OF 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)
Planned Parenthood Votes

A. Marie McKellar
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 149
 City Dobbs Ferry State NY Zip Code 10522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2014
Transaction ID : A2014-2105174
 Amount of Each Receipt this Period
 5000.00

B. Sandra Meyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 767 Fifth Avenue, 18th Fl.
 City New York State NY Zip Code 10153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 26 / 2014
Transaction ID : A2014-2105175
 Amount of Each Receipt this Period
 5000.00

C. Albert Neilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Chickadee Drive
 City Topsham State ME Zip Code 04086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 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
 08 / 12 / 2014
Transaction ID : A2014-2105176
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 10500.00
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 12 OF 58
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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. Karen Oh
Full Name (Last, First, Middle Initial)
Mailing Address 83 Duncan Drive
City Greenwich State CT Zip Code 06831
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
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
08 / 04 / 2014
Transaction ID : A2014-2105177
Amount of Each Receipt this Period
500.00

B. Planned Parenthood Action Fund
Full Name (Last, First, Middle Initial)
Mailing Address 434 West 33rd Street
City New York State NY Zip Code 10001
FEC ID number of contributing federal political committee. **C**
Name of Employer Planned Parenthood Action Fund Occupation N/A
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 37349.75

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 31 / 2014
Transaction ID : A2014-2108240
Amount of Each Receipt this Period
5367.12
In-kind contribution: staff time for accounting and FEC compliance

C. Jill Scheuer
Full Name (Last, First, Middle Initial)
Mailing Address 78 Penn Road
City Scarsdale State NY Zip Code 10583
FEC ID number of contributing federal political committee. **C**
Name of Employer Self - Employed Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 01 / 2014
Transaction ID : A2014-2106494
Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6867.12
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 13 OF 58
<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. Sybil Shainwald
Full Name (Last, First, Middle Initial)
Mailing Address 200 W 57th Street, #402

City New York	State NY	Zip Code 10019
------------------	-------------	-------------------

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

Name of Employer Law Offices of Sybil Shainwald	Occupation Attorney
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	04	/	2014

Transaction ID : A2014-2106520

Amount of Each Receipt this Period
500.00

B. Janet Silver
Full Name (Last, First, Middle Initial)
Mailing Address 400 Park Shore Drive, #304

City Naples	State FL	Zip Code 34103
----------------	-------------	-------------------

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

Name of Employer The Hampton Sheet	Occupation Writer
---------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	04	/	2014

Transaction ID : A2014-2106521

Amount of Each Receipt this Period
500.00

c. Charline Spektor
Full Name (Last, First, Middle Initial)
Mailing Address 95 Christopher Street

City New York	State NY	Zip Code 10014
------------------	-------------	-------------------

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

Name of Employer BookHampton LLC	Occupation Store Owner
-------------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	01	/	2014

Transaction ID : A2014-2108220

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: (check only one)	PAGE 14 OF 58
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Mary Ann Stein
Full Name (Last, First, Middle Initial)

Mailing Address 1634 I Street NW, Suite 1000

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

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

Name of Employer Moriah Fund	Occupation Attorney
---------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		15		2014

Transaction ID : A2014-2108221

Amount of Each Receipt this Period
25000.00

B. Ms. Kathleen M Tait
Full Name (Last, First, Middle Initial)

Mailing Address 111 Barrow Street #7C

City New York	State NY	Zip Code 10014
------------------	-------------	-------------------

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

Name of Employer None	Occupation Professional Volunteer
--------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		05		2014

Transaction ID : A2014-2108222

Amount of Each Receipt this Period
1500.00

C. Clara Weyergraf-Serra
Full Name (Last, First, Middle Initial)

Mailing Address 173 Duane Street #6

City New York	State NY	Zip Code 10013
------------------	-------------	-------------------

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

Name of Employer Self - Employed	Occupation Manager
-------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		15		2014

Transaction ID : A2014-2108223

Amount of Each Receipt this Period
50000.00

SUBTOTAL of Receipts This Page (optional).....▶	76500.00
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 15 OF 58
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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

Full Name (Last, First, Middle Initial) A. Don Zacharia		Date of Receipt MM / DD / YYYY 08 / 05 / 2014 Transaction ID : A2014-2108224
Mailing Address 4 Sherbrooke Road		Amount of Each Receipt this Period 2500.00
City Scarsdale	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Zachys.com	Occupation Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Ms. Annette Cumming		Date of Receipt MM / DD / YYYY 08 / 03 / 2014 Transaction ID : A2014-2296190
Mailing Address 165 Huckleberry Drive		Amount of Each Receipt this Period 9036.17
City Jackson	State WY	Zip Code 83001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9036.17
Name of Employer Forthcoming Fund	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 9036.17	In-kind contribution: PP Votes fundraising party. See line 21b

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	11536.17
TOTAL This Period (last page this line number only).....▶	226653.29

**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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Annette Cumming

Mailing Address 165 Huckleberry Dr.

City Jackson State WY Zip Code 83001

Purpose of Disbursement
In-kind contribution: PP Votes fundraising party. See line 11a.

003
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2014

Transaction ID : B536241

Amount of Each Disbursement this Period

9036.17

Full Name (Last, First, Middle Initial)

B. American Express Merchant Services

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit card fee

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2014

Transaction ID : B532131

Amount of Each Disbursement this Period

162.89

Full Name (Last, First, Middle Initial)

C. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Independent Expenditure for Hagan. See Schedule E

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : B511020

Amount of Each Disbursement this Period

-13493.26

Draw down on advance to COG reported on line 21b of the 2014 FEC August Monthly report

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

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

-4294.20

**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)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement Independent Expenditure for Hagan. See Schedule E

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : B511021

Amount of Each Disbursement this Period

-13493.26

Draw down on advance to COG reported on line 21b of the 2014 FEC August Monthly report

Full Name (Last, First, Middle Initial)

B. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement Independent Expenditure for Hagan. See Schedule E

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : B511022

Amount of Each Disbursement this Period

-8995.51

Draw down on advance to COG reported on line 21b of the 2014 FEC August Monthly report

Full Name (Last, First, Middle Initial)

C. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement Independent Expenditure for Hagan. See Schedule E

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : B511023

Amount of Each Disbursement this Period

-8995.50

Draw down on advance to COG reported on line 21b of the 2014 FEC August Monthly report

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

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

-31484.27

**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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Advance payments for independent expenditures

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State:

District:

Date of Disbursement

/ /

Transaction ID : B532136

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Premiere Global Services

Mailing Address P.O. Box 404351

City Atlanta State GA Zip Code 30384

Purpose of Disbursement
Phone charges

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State:

District:

Date of Disbursement

/ /

Transaction ID : B532137

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Health Systems Action Fund

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
Independent Expenditure for Hagan. See Schedule E

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State:

District:

Date of Disbursement

/ /

Transaction ID : B509608

Amount of Each Disbursement this Period

Draw down on advance to PPHS-AF reported on line 21b of the 2014 FEC July Monthly report

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"/> 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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Health Systems Action Fund

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
Independent Expenditure for Hagan. See Schedule E

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : B509610

Amount of Each Disbursement this Period

-3975.00

Draw down on advance to PPHS-AF reported on line 21b of the 2014 FEC July Monthly report

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Health Systems Action Fund

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
Independent Expenditure for Hagan. See Schedule E

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : B509611

Amount of Each Disbursement this Period

-2650.00

Draw down on advance to PPHS-AF reported on line 21b of the 2014 FEC July Monthly report

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Health Systems Action Fund

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
Independent Expenditure for Hagan. See Schedule E

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : B509612

Amount of Each Disbursement this Period

-2650.00

Draw down on advance to PPHS-AF reported on line 21b of the 2014 FEC July Monthly report

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

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

-9275.00

**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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Health Systems Action Fund

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
Expenses of fundraising event

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	4

Transaction ID : B532114

Amount of Each Disbursement this Period

4	5	4	5	.	3	6
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Sundberg & Associates, Inc.

Mailing Address 9 East 45th Street

City New York State NY Zip Code 10017

Purpose of Disbursement
Design and printing of fundraising brochure

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	4

Transaction ID : B532124

Amount of Each Disbursement this Period

8	8	9	.	8	3
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement
In-kind contribution of staff travel expenses in support of PP Pennsylvania PAC (non-federal PA PAC)

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	4

Transaction ID : B532180

Amount of Each Disbursement this Period

-	7	2	.	6	0
---	---	---	---	---	---

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

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

5	3	6	2	.	5	9
---	---	---	---	---	---	---

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

5	3	6	2	.	5	9
---	---	---	---	---	---	---

**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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP Pennsylvania PAC (non-federal PA PAC)
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

/ /

Transaction ID : B532184

Amount of Each Disbursement this Period

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement
In-kind contribution of staff time in support of Wendy Davis, Gov candidate in NY
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

/ /

Transaction ID : B532188

Amount of Each Disbursement this Period

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP TX Votes PAC (non-federal TX PAC)
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

/ /

Transaction ID : B532192

Amount of Each Disbursement this Period

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

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"/> 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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement
In-kind contribution of staff travel expenses in support of PP TX Votes PAC (non-federal TX PAC)
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2014

Transaction ID : B532194

Amount of Each Disbursement this Period

-1704.48

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP Pennsylvania PAC (non-federal PA PAC)
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2014

Transaction ID : B532186

Amount of Each Disbursement this Period

-787.73

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement
In-kind contribution of staff time in support of Wendy Davis, Gov candidate in TX
Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2014

Transaction ID : B532190

Amount of Each Disbursement this Period

-847.04

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

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

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

-3339.25

**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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement In-kind contribution of staff time in support of PP TX Votes PAC (non-federal TX PAC)
Candidate Name

001
Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼ Not Applicable

Date of Disbursement
MM / DD / YYYY
08 / 23 / 2014

Transaction ID : B532196

Amount of Each Disbursement this Period
-2457.04

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement In-kind contribution of staff time in support of Tom Wolf, Gov candidate in PA
Candidate Name

001
Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼ Not Applicable

Date of Disbursement
MM / DD / YYYY
08 / 23 / 2014

Transaction ID : B532198

Amount of Each Disbursement this Period
-37.46

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund Inc.

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement Staff time for fundraising efforts. See Schedule D.
Candidate Name

001
Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼ Not Applicable

Date of Disbursement
MM / DD / YYYY
08 / 23 / 2014

Transaction ID : B532110

Amount of Each Disbursement this Period
11727.28

[MEMO ITEM]

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

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

-2494.50

**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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund Inc.

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement
Payment for debt originally reported on August Monthly Report. See Schedule

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2014

Transaction ID : B509615

Amount of Each Disbursement this Period

9598.13

Full Name (Last, First, Middle Initial)

B. Sundberg & Associates, Inc.

Mailing Address 9 East 45th Street

City New York State NY Zip Code 10017

Purpose of Disbursement
Design and printing of fundraising brochure

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2014

Transaction ID : B532125

Amount of Each Disbursement this Period

341.20

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund Inc.

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement
In-kind contribution: staff time for accounting and FEC compliance

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2014

Transaction ID : B532203

Amount of Each Disbursement this Period

5367.12

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

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

15306.45

**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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Blackbaud Inc.

Mailing Address 2000 Daniel Island Drive

City Charleston State SC Zip Code 29492

Purpose of Disbursement
Credit card fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2014

Transaction ID : B532127

Amount of Each Disbursement this Period

130.68

Full Name (Last, First, Middle Initial)

B. Blackbaud Inc.

Mailing Address 2000 Daniel Island Drive

City Charleston State SC Zip Code 29492

Purpose of Disbursement
Credit card fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2014

Transaction ID : B532128

Amount of Each Disbursement this Period

389.96

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement
Merchant fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : B532130

Amount of Each Disbursement this Period

207.11

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

727.75

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

161603.82

**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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Votes - St. Louis

Mailing Address 4251 Forest Park Ave

City State Zip Code
St Louis MO 63108

Purpose of Disbursement
Contribution to non-federal PAC

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2014

Transaction ID : B532133

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Votes - St. Louis

Mailing Address 4251 Forest Park Ave

City State Zip Code
St Louis MO 63108

Purpose of Disbursement
Contribution to non-federal PAC

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2014

Transaction ID : B532134

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Central NC Action Fund

Mailing Address PO Box 9194

City State Zip Code
Chapel Hill NC 27515

Purpose of Disbursement
Expenses of fundraising event

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2014

Transaction ID : B532113

Amount of Each Disbursement this Period

3594.52

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

53594.52

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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff travel expenses in support of PP Pennsylvania PAC (non-federal PA PAC)
Candidate Name

PP Pennsylvania PAC

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Not Applicable**

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2014

Transaction ID : B532179

Amount of Each Disbursement this Period

72.60

See line 21b

Full Name (Last, First, Middle Initial)

B. Sundberg & Associates, Inc.

Mailing Address 9 East 45th Street

City State Zip Code
New York NY 10017

Purpose of Disbursement
Payment for 5/1/14 in-kind contrib of advocacy materials to Allyson Schwartz, Gov. candidate in PA
Candidate Name

Allyson Schwartz

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Not Applicable**

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2014

Transaction ID : B532120

Amount of Each Disbursement this Period

612.50

Full Name (Last, First, Middle Initial)

C. Sundberg & Associates, Inc.

Mailing Address 9 East 45th Street

City State Zip Code
New York NY 10017

Purpose of Disbursement
Payment for 9/11/14 In-kind contribution of advocacy materials to Tom Wolf, Gov. candidate in PA
Candidate Name

Tom Wolf

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Not Applicable**

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2014

Transaction ID : B532122

Amount of Each Disbursement this Period

12.76

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

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

697.86

--

**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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund Inc.

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement
In-kind contribution of predictive dialer minutes to PP PA PAC

011

Candidate Name

PP Pennsylvania PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : B532139

Amount of Each Disbursement this Period

3600.00

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP Pennsylvania PAC (non-federal PA PAC)

011

Candidate Name

PP Pennsylvania PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY
08 / 09 / 2014

Transaction ID : B532183

Amount of Each Disbursement this Period

1759.13

See line 21b

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP Pennsylvania PAC (non-federal PA PAC)

011

Candidate Name

PP Pennsylvania PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2014

Transaction ID : B532185

Amount of Each Disbursement this Period

787.73

See line 21b

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

6146.86

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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff time in support of Tom Wolf, Gov candidate in PA

010
 011
Category/
Type

Candidate Name
Tom Wolf

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 23 / 2014

Transaction ID : B532197

Amount of Each Disbursement this Period

37.46

See line 21b

Full Name (Last, First, Middle Initial)

B. Sundberg & Associates, Inc.

Mailing Address 9 East 45th Street

City State Zip Code
New York NY 10017

Purpose of Disbursement
Payment for 4/7/14 in-kind contribution of advocacy materials to Wendy Davis, Gov candidate in TX

010
 011
Category/
Type

Candidate Name
Wendy Davis

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 05 / 2014

Transaction ID : B532119

Amount of Each Disbursement this Period

837.50

Full Name (Last, First, Middle Initial)

C. Sundberg & Associates, Inc.

Mailing Address 9 East 45th Street

City State Zip Code
New York NY 10017

Purpose of Disbursement
Payment for 9/11/14 In-kind contribution of advocacy materials to Wendy Davis, Gov candidate in TX

010
 011
Category/
Type

Candidate Name
Wendy Davis

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 05 / 2014

Transaction ID : B532123

Amount of Each Disbursement this Period

47.41

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

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

922.37

**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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP TX Votes PAC (non-federal TX PAC)

Candidate Name
PP TX Votes PAC

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 09 / 2014

Transaction ID : B532191

Amount of Each Disbursement this Period

2191.27

See line 21b

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff time in support of Wendy Davis, Gov candidate in TX

Candidate Name
Wendy Davis

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

MM / DD / YYYY
08 / 09 / 2014

Transaction ID : B532187

Amount of Each Disbursement this Period

722.19

See line 21b

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff travel expenses in support of PP TX Votes PAC (non-federal TX PAC)

Candidate Name
PP TX Votes PAC

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2014

Transaction ID : B532193

Amount of Each Disbursement this Period

1704.48

See line 21b

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

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

4617.94

**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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Benenson Strategy Group

Mailing Address 720 S. Colorado Blvd Suite 500N

City State Zip Code
Denver CO 80246

Purpose of Disbursement
In-kind contribution of polling in support of PP TX Votes PAC

011

Candidate Name

PP TX Votes PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2014

Transaction ID : B532153

Amount of Each Disbursement this Period

17000.00

Full Name (Last, First, Middle Initial)

B. Benenson Strategy Group

Mailing Address 720 S. Colorado Blvd Suite 500N

City State Zip Code
Denver CO 80246

Purpose of Disbursement
In-kind contribution of polling in support of Wendy Davis, Gov. candidate in TX

011

Candidate Name

Wendy Davis

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2014

Transaction ID : B532160

Amount of Each Disbursement this Period

17000.00

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP TX Votes PAC (non-federal TX PAC)

011

Candidate Name

PP TX Votes PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2014

Transaction ID : B532195

Amount of Each Disbursement this Period

2457.04

See line 21b

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

36457.04

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)
Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff time in support of Wendy Davis, Gov candidate in TX

Candidate Name

Wendy Davis

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	4

Transaction ID : B532189

Amount of Each Disbursement this Period

8	4	7	.	0	4
---	---	---	---	---	---

See line 21b

B.

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

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--

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

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--

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

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

8	4	7	.	0	4
---	---	---	---	---	---

1	0	3	2	8	3	.	6	3
---	---	---	---	---	---	---	---	---

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 33 OF 58
	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 State Zip Code Alexandria VA 22311	

Outstanding Balance Beginning This Period 3950.00	Transaction ID : D439006	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3950.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planned Parenthood Action Fund Inc.	Nature of Debt (Purpose): Staff time for fundraising efforts and non-federal in-kind activity. See line 21b & Schedule E
Mailing Address 434 West 33rd Street	
City State Zip Code New York NY 10001	

Outstanding Balance Beginning This Period 12866.76	Transaction ID : D539006	
Amount Incurred This Period 16817.55	Payment This Period 12866.76	Outstanding Balance at Close of This Period 16817.55

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sundberg & Associates, Inc.	Nature of Debt (Purpose): Graphic design for fundraising and advocacy communications. See Schedule E
Mailing Address 9 East 45th Street	
City State Zip Code New York NY 10017	

Outstanding Balance Beginning This Period 900.00	Transaction ID : D739006	
Amount Incurred This Period 0.00	Payment This Period 900.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	20767.55
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 34 OF 58
	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 FedEx	Nature of Debt (Purpose): Shipping of invitations for fundraiser.
Mailing Address 326 7th Avenue	
City State Zip Code New York NY 10001	

Outstanding Balance Beginning This Period 21.04	Transaction ID : D739009	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 21.04

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PPCNC Action Fund	Nature of Debt (Purpose): Postage of invitations for fundraiser. See Schedule E
Mailing Address PO Box 9194	
City State Zip Code Chapel Hill NC 27515	

Outstanding Balance Beginning This Period 30.48	Transaction ID : D739010	
Amount Incurred This Period 200.00	Payment This Period 30.00	Outstanding Balance at Close of This Period 200.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor 76 Words	Nature of Debt (Purpose): Production of advertisement. See Schedule E
Mailing Address 1720 Eye Street NW, Ste 550	
City State Zip Code Washington DC 20006	

Outstanding Balance Beginning This Period 1500.00	Transaction ID : D739012	
Amount Incurred This Period 33509.00	Payment This Period 1500.00	Outstanding Balance at Close of This Period 33509.00

1) SUBTOTALS This Period This Page (optional)..... ▶	33730.04
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 35 OF 58
	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): Production of advertisement.
Mailing Address 2229 North Pollard St	
City State Zip Code Arlington VA 22207	

Outstanding Balance Beginning This Period 18210.00	Transaction ID : D739013	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 18210.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Work for Progress	Nature of Debt (Purpose): Distribution of canvass literature. See Schedule E
Mailing Address 1543 Wazee Street, 4th Floor	
City State Zip Code Denver CO 80202	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D739014	
Amount Incurred This Period 24300.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 24300.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Analyst Institute LLC	Nature of Debt (Purpose): Testing of online ads. See Schedule E
Mailing Address 815 16th Street, NW	
City State Zip Code Washington DC 20006	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D739015	
Amount Incurred This Period 5000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

1) SUBTOTALS This Period This Page (optional)..... ▶	47510.00
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 36 OF 58
	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 Feldman Group Inc.	Nature of Debt (Purpose): Messaging research. See Schedule E
Mailing Address 508-510 8th St. SE	
City State Zip Code Washington DC 20003	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D739016	
Amount Incurred This Period 31000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 31000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rising Tide Interactive	Nature of Debt (Purpose): Online advertising. See Schedule E
Mailing Address 901 New York Ave NW #470 East	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D739017	
Amount Incurred This Period 14457.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 14457.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Pivot Group	Nature of Debt (Purpose): Printing of canvass literature. See Schedule E
Mailing Address 1701 I Street NW Ste 550	
City State Zip Code Washington DC 20005	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D739018	
Amount Incurred This Period 2770.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2770.00

1) SUBTOTALS This Period This Page (optional)..... ▶	48227.75
2) TOTALS This Period (last page this line number only)..... ▶	150235.34
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) ▶	150235.34

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: Community Outreach Group LLC
Mailing Address: 1110 Vermont Ave N.W.
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Volunteer recruitment phone banks.
Category/Type: 004
Date of Public Distribution/Dissemination: 08/01/2014
Amount: 13493.26
Transaction ID: B508872
Date of Disbursement or Obligation: 08/01/2014
Name of Federal Candidate: Kay Hagan
Support: [X] Oppose: []
Office Sought: House [] Senate [X] State: NC
Disbursement For: Primary [] General [X] Other []

Full Name of Payee: Community Outreach Group LLC
Mailing Address: 1110 Vermont Ave N.W.
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Persuasion phone banks
Category/Type: 004
Date of Public Distribution/Dissemination: 08/01/2014
Amount: 13493.26
Transaction ID: B508873
Date of Disbursement or Obligation: 08/01/2014
Name of Federal Candidate: Kay Hagan
Support: [X] Oppose: []
Office Sought: House [] Senate [X] State: NC
Disbursement For: Primary [] General [X] Other []

(a) SUBTOTAL of Itemized Independent Expenditures: 26986.52
(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.
Signature: Aletheia Henry [Electronically Filed] Date: 09/18/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Community Outreach Group LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 01 / 2014
Mailing Address 1110 Vermont Ave N.W.	Amount 8995.51
City Washington State DC Zip Code 20005	Transaction ID : B508874 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 01 / 2014
Purpose of Expenditure Persuasion canvasses	Category/Type 004
Name of Federal Candidate Kay Hagan	<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: NC
Calendar Year-To-Date Per Election for Office Sought 202713.61	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Community Outreach Group LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 01 / 2014
Mailing Address 1110 Vermont Ave N.W.	Amount 8995.50
City Washington State DC Zip Code 20005	Transaction ID : B508875 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 01 / 2014
Purpose of Expenditure Persuasion events	Category/Type 004
Name of Federal Candidate Kay Hagan	<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: NC
Calendar Year-To-Date Per Election for Office Sought 202713.61	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	17991.01
(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.

Aletheia Henry [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 09 / 18 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Planned Parenthood Health Systems Action Fund	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 01 / 2014
Mailing Address 100 South Boylan Ave.	Amount 3975.00
City Raleigh State NC Zip Code 27603	Transaction ID : B508876
Purpose of Expenditure Volunteer recruitment phone banks	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 01 / 2014
Name of Federal Candidate Kay Hagan	Category/Type 004
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 202713.61	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Planned Parenthood Health Systems Action Fund	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 01 / 2014
Mailing Address 100 South Boylan Ave.	Amount 3975.00
City Raleigh State NC Zip Code 27603	Transaction ID : B508877
Purpose of Expenditure Persuasion phone banks	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 01 / 2014
Name of Federal Candidate Kay Hagan	Category/Type 004
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 202713.61	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	7950.00
(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.

Aletheia Henry [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
09 / 18 / 2014

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Planned Parenthood Health Systems Action Fund	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 01 / 2014
Mailing Address 100 South Boylan Ave.	Amount 2650.00
City Raleigh State NC Zip Code 27603	Transaction ID : B508878 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 01 / 2014
Purpose of Expenditure Persuasion canvasses	Category/Type 004
Name of Federal Candidate Kay Hagan	<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: NC
Calendar Year-To-Date Per Election for Office Sought 202713.61	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Planned Parenthood Health Systems Action Fund	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 01 / 2014
Mailing Address 100 South Boylan Ave.	Amount 2650.00
City Raleigh State NC Zip Code 27603	Transaction ID : B508879 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 01 / 2014
Purpose of Expenditure Events	Category/Type 004
Name of Federal Candidate Kay Hagan	<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: NC
Calendar Year-To-Date Per Election for Office Sought 202713.61	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5300.00
(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.

Aletheia Henry [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
09 / 18 / 2014

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
The Pivot Group
[MEMO ITEM]
Mailing Address 1701 I Street NW Ste 550
City Washington State DC Zip Code 20005
Purpose of Expenditure Printing of canvass literature. See Schedule D
Category/Type 004
Name of Federal Candidate Kay Hagan
Support [X] Oppose []
Office Sought: House [] Senate [X] State: NC
Calendar Year-To-Date Per Election for Office Sought 204098.61

Date of Public Distribution/Dissemination 08 / 02 / 2014
Amount 1385.00
Transaction ID : B508880
Date of Disbursement or Obligation 08 / 02 / 2014
Disbursement For: Primary [] General [X] Other (specify) []

Full Name of Payee
The Pivot Group
[MEMO ITEM]
Mailing Address 1701 I Street NW Ste 550
City Washington State DC Zip Code 20005
Purpose of Expenditure Printing of canvass literature. See Schedule D
Category/Type 004
Name of Federal Candidate Thom Tillis
Support [] Oppose [X]
Office Sought: House [] Senate [X] State: NC
Calendar Year-To-Date Per Election for Office Sought 2059.66

Date of Public Distribution/Dissemination 08 / 02 / 2014
Amount 1385.00
Transaction ID : B508881
Date of Disbursement or Obligation 08 / 02 / 2014
Disbursement For: Primary [] General [X] Other (specify) []

(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.
Aletheia Henry
[Electronically Filed]
Date 09 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee 76 Words	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 / 19 / 2014
Mailing Address 1720 Eye Street NW, Ste 550	Amount 1500.00
City Washington State DC Zip Code 20006	Transaction ID : B499103 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 05 / 2014
Purpose of Expenditure Payment for Independent Expenditure originally reported on July Monthly Report. See Schedule D	Category/Type 004
Name of Federal Candidate Cory Gardner	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: CO
Calendar Year-To-Date Per Election for Office Sought 6510.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Planned Parenthood Central NC Action Fund	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 16 / 2014
Mailing Address PO Box 9194	Amount 29.16
City Chapel Hill State NC Zip Code 27515	Transaction ID : B498440 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 05 / 2014
Purpose of Expenditure Payment for Independent Expenditure originally reported on August Monthly Report. See Schedule D	Category/Type 004
Name of Federal Candidate Kay Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: NC
Calendar Year-To-Date Per Election for Office Sought 204129.09	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1529.16
(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.

Aletheia Henry [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
09 / 18 / 2014

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
Planned Parenthood Central NC Action Fund
Mailing Address PO Box 9194
City Chapel Hill State NC Zip Code 27515
Date of Public Distribution/Dissemination 06/05/2014
Amount 1.32
Transaction ID : B498443
Date of Disbursement or Obligation 08/05/2014
Purpose of Expenditure
Payment for Independent Expenditure originally reported on August Monthly Report. See Schedule D
Category/Type 004
Name of Federal Candidate Kay Hagan
Support
Office Sought: Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 204129.09
Disbursement For: General 2014

Full Name of Payee
Planned Parenthood Action Fund Inc.
MEMO ITEM
Mailing Address 434 West 33rd Street
City New York State NY Zip Code 10001
Date of Public Distribution/Dissemination 08/07/2014
Amount 1200.00
Transaction ID : B510987
Date of Disbursement or Obligation 08/07/2014
Purpose of Expenditure
Predictive dialer minutes for volunteer phonebanks. See Schedule D
Category/Type 004
Name of Federal Candidate Kay Hagan
Support
Office Sought: Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 205329.09
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 1.32
(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.
Aletheia Henry
[Electronically Filed]
Date 09/18/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Planned Parenthood Action Fund Inc. [MEMO ITEM]	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 14 / 2014
Mailing Address 434 West 33rd Street	Amount 95.10
City State Zip Code New York NY 10001	Transaction ID : B510986 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 14 / 2014
Purpose of Expenditure List rental. See Schedule D	Category/Type 004
Name of Federal Candidate Thom Tillis	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 2154.76	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Planned Parenthood Action Fund Inc. [MEMO ITEM]	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 19 / 2014
Mailing Address 434 West 33rd Street	Amount 55.17
City State Zip Code New York NY 10001	Transaction ID : B510988 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 19 / 2014
Purpose of Expenditure List rental. See Schedule D	Category/Type 004
Name of Federal Candidate Thom Tillis	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 2209.93	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(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.

Aletheia Henry **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 09 / 18 / 2014

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee The Strategy Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 20 / 2014
Mailing Address 1140 Connecticut Ave NW, Suite 800	Amount 11500.00
City Washington State DC Zip Code 20036	Transaction ID : B510613 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 27 / 2014
Purpose of Expenditure Canvass literature	Category/Type 004
Name of Federal Candidate Mark Udall	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 11500.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee The Strategy Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 20 / 2014
Mailing Address 1140 Connecticut Ave NW, Suite 800	Amount 11500.00
City Washington State DC Zip Code 20036	Transaction ID : B510615 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 27 / 2014
Purpose of Expenditure Canvass literature	Category/Type 004
Name of Federal Candidate Cory Gardner	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 18010.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	23000.00
(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.

Aletheia Henry [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 09 / 18 / 2014

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
Work for Progress
MEMO ITEM
Mailing Address
1543 Wazee Street, 4th Floor
City
Denver State
CO Zip Code
80202
Purpose of Expenditure
Distribution of canvass literature. See Schedule D
Category/Type
004
Name of Federal Candidate
Mark Udall
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
23650.00

Date of Public Distribution/Dissemination
08 / 23 / 2014
Amount
12150.00
Transaction ID : B510743
Date of Disbursement or Obligation
08 / 23 / 2014
Office Sought:
House District:
President Senate State: CO
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Work for Progress
MEMO ITEM
Mailing Address
1543 Wazee Street, 4th Floor
City
Denver State
CO Zip Code
80202
Purpose of Expenditure
Distribution of canvass literature. See Schedule D
Category/Type
004
Name of Federal Candidate
Cory Gardner
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
30160.00

Date of Public Distribution/Dissemination
08 / 23 / 2014
Amount
12150.00
Transaction ID : B510744
Date of Disbursement or Obligation
08 / 23 / 2014
Office Sought:
House District:
President Senate State: CO
Disbursement For:
Primary General
Other (specify)

(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.
Aletheia Henry
[Electronically Filed]
Date 09 / 18 / 2014
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
Planned Parenthood Action Fund Inc.
MEMO ITEM
Mailing Address 434 West 33rd Street
City New York State NY Zip Code 10001
Purpose of Expenditure Predictive dialer minutes for volunteer phonebanks. See Schedule D
Category/Type 004
Name of Federal Candidate Kay Hagan
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 209069.09

Date of Public Distribution/Dissemination 08/23/2014
Amount 3740.00
Transaction ID : B510989
Date of Disbursement or Obligation 08/23/2014
Office Sought: House Senate State: NC
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee
Planned Parenthood Action Fund
Mailing Address 434 West 33rd Street
City New York State NY Zip Code 10001
Purpose of Expenditure Payment for Independent Expenditure originally reported on August Monthly Report. See Schedule D
Category/Type 004
Name of Federal Candidate Thom Tillis
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 3615.06

Date of Public Distribution/Dissemination 07/30/2014
Amount 177.76
Transaction ID : B508901
Date of Disbursement or Obligation 08/25/2014
Office Sought: House Senate State: NC
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 177.76
(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.
Aletheia Henry
[Electronically Filed]
Date 09/18/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Planned Parenthood Action Fund	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 02 / 2014
Mailing Address 434 West 33rd Street	Amount M M / D D / Y Y Y Y Y Y 135.00
City State Zip Code New York NY 10001	Transaction ID : B508860 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2014
Purpose of Expenditure Payment for Independent Expenditure originally reported on August Monthly Report. See Schedule D	Category/Type 004
Name of Federal Candidate Kay Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: NC
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 210932.59	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Planned Parenthood Action Fund	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 10 / 2014
Mailing Address 434 West 33rd Street	Amount M M / D D / Y Y Y Y Y Y 230.13
City State Zip Code New York NY 10001	Transaction ID : B508863 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2014
Purpose of Expenditure Payment for Independent Expenditure originally reported on August Monthly Report. See Schedule D	Category/Type 004
Name of Federal Candidate Thom Tillis	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: NC
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 3615.06	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	M M / D D / Y Y Y Y Y Y 365.13
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	M M / D D / Y Y Y Y Y Y
(c) TOTAL Independent Expenditures.....▶	M M / D D / Y Y Y Y Y Y

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.

Aletheia Henry
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y
09 / 18 / 2014

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: Planned Parenthood Action Fund
Mailing Address: 434 West 33rd Street
City: New York, State: NY, Zip Code: 10001
Date of Public Distribution/Dissemination: 07/02/2014
Amount: 135.00
Transaction ID: B508861
Date of Disbursement or Obligation: 08/25/2014
Purpose of Expenditure: Payment for Independent Expenditure originally reported on August Monthly Report. See Schedule D
Category/Type: 004
Name of Federal Candidate: Thom Tillis
Support: [], Oppose: [X]
Office Sought: [] President, [X] Senate
State: NC
Disbursement For: [] Primary, [X] General
Calendar Year-To-Date Per Election for Office Sought: 3615.06

Full Name of Payee: Planned Parenthood Action Fund
Mailing Address: 434 West 33rd Street
City: New York, State: NY, Zip Code: 10001
Date of Public Distribution/Dissemination: 07/10/2014
Amount: 388.66
Transaction ID: B508864
Date of Disbursement or Obligation: 08/25/2014
Purpose of Expenditure: Payment for Independent Expenditure originally reported on August Monthly Report. See Schedule D
Category/Type: 004
Name of Federal Candidate: Kay Hagan
Support: [X], Oppose: []
Office Sought: [] President, [X] Senate
State: NC
Disbursement For: [] Primary, [X] General
Calendar Year-To-Date Per Election for Office Sought: 210932.59

(a) SUBTOTAL of Itemized Independent Expenditures: 523.66
(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.
Signature: Aletheia Henry
[Electronically Filed]
Date: 09/18/2014

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
Planned Parenthood Action Fund
Mailing Address
434 West 33rd Street
City
New York State
NY Zip Code
10001

Date of Public Distribution/Dissemination
07 / 10 / 2014
Amount
388.67
Transaction ID : B508865
Date of Disbursement or Obligation

Purpose of Expenditure
Payment for Independent Expenditure originally reported on
August Monthly Report. See Schedule D
Category/ Type
004

Name of Federal Candidate
Thom Tillis
Support
Oppose

Office Sought:
House
Senate
District:
State: NC

Calendar Year-To-Date
Per Election for Office Sought
3615.06

Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Planned Parenthood Action Fund
Mailing Address
434 West 33rd Street
City
New York State
NY Zip Code
10001

Date of Public Distribution/Dissemination
07 / 23 / 2014
Amount
333.73
Transaction ID : B508866
Date of Disbursement or Obligation

Purpose of Expenditure
Payment for Independent Expenditure originally reported on
August Monthly Report. See Schedule D
Category/ Type
004

Name of Federal Candidate
Thom Tillis
Support
Oppose

Office Sought:
House
Senate
District:
State: NC

Calendar Year-To-Date
Per Election for Office Sought
3615.06

Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 722.40
(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.

Aletheia Henry
[Electronically Filed]
Date 09 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Planned Parenthood Action Fund	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 24 / 2014
Mailing Address 434 West 33rd Street	Amount 1200.00
City State Zip Code New York NY 10001	Transaction ID : B508867 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2014
Purpose of Expenditure Payment for Independent Expenditure originally reported on August Monthly Report. See Schedule D	Category/Type 004
Name of Federal Candidate Kay Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 210932.59	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Planned Parenthood Action Fund	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 30 / 2014
Mailing Address 434 West 33rd Street	Amount 8.74
City State Zip Code New York NY 10001	Transaction ID : B508868 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2014
Purpose of Expenditure Payment for Independent Expenditure originally reported on August Monthly Report. See Schedule D	Category/Type 004
Name of Federal Candidate Kay Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 210932.59	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1208.74
(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.

Aletheia Henry
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y
09 / 18 / 2014

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: Planned Parenthood Action Fund
Mailing Address: 434 West 33rd Street
City: New York, State: NY, Zip Code: 10001
Date of Public Distribution/Dissemination: 07/30/2014
Amount: 8.74
Transaction ID: B508869
Date of Disbursement or Obligation: 08/25/2014
Purpose of Expenditure: Payment for Independent Expenditure originally reported on August Monthly Report. See Schedule D
Category/Type: 004
Name of Federal Candidate: Thom Tillis
Support: [], Oppose: [X]
Office Sought: [] President, [X] Senate
State: NC
Disbursement For: [] Primary, [X] General
Calendar Year-To-Date Per Election for Office Sought: 3615.06

Full Name of Payee: Planned Parenthood Action Fund
Mailing Address: 434 West 33rd Street
City: New York, State: NY, Zip Code: 10001
Date of Public Distribution/Dissemination: 07/30/2014
Amount: 131.10
Transaction ID: B508870
Date of Disbursement or Obligation: 08/25/2014
Purpose of Expenditure: Payment for Independent Expenditure originally reported on August Monthly Report. See Schedule D
Category/Type: 004
Name of Federal Candidate: Kay Hagan
Support: [X], Oppose: []
Office Sought: [] President, [X] Senate
State: NC
Disbursement For: [] Primary, [X] General
Calendar Year-To-Date Per Election for Office Sought: 210932.59

(a) SUBTOTAL of Itemized Independent Expenditures: 139.84
(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.

Aletheia Henry
[Electronically Filed]
Date: 09/18/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Planned Parenthood Action Fund	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 30 / 2014
Mailing Address 434 West 33rd Street	Amount 131.10
City State Zip Code New York NY 10001	Transaction ID : B508871 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 25 / 2014
Purpose of Expenditure Payment for Independent Expenditure originally reported on August Monthly Report. See Schedule D	Category/Type 004
Name of Federal Candidate Thom Tillis	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 3615.06	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Sundberg & Associates, Inc.	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
Mailing Address 9 East 45th Street	Amount 900.00
City State Zip Code New York NY 10017	Transaction ID : B494221 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 26 / 2014
Purpose of Expenditure Payment for Independent Expenditure originally reported on April Monthly Report. See Schedule D	Category/Type 004
Name of Federal Candidate Kay Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 211832.59	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1031.10
(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.

Aletheia Henry [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

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
Planned Parenthood Central NC Action Fund
[MEMO ITEM]
Mailing Address PO Box 9194
City Chapel Hill State NC Zip Code 27515
Purpose of Expenditure Space rental for production of online advertising. See Schedule D
Category/Type 004
Name of Federal Candidate Kay Hagan
Support [X] Oppose []
Office Sought: House [] Senate [X]
State: NC
Calendar Year-To-Date Per Election for Office Sought 240019.83

Date of Public Distribution/Dissemination
08 / 27 / 2014
Amount 200.00
Transaction ID : B511887
Date of Disbursement or Obligation
08 / 27 / 2014
Disbursement For: Primary [] General [X]
Other (specify)

Full Name of Payee
76 Words
[MEMO ITEM]
Mailing Address 1720 Eye Street NW, Ste 550
City Washington State DC Zip Code 20006
Purpose of Expenditure Production of online ads. See Schedule D
Category/Type 004
Name of Federal Candidate Kay Hagan
Support [X] Oppose []
Office Sought: House [] Senate [X]
State: NC
Calendar Year-To-Date Per Election for Office Sought 240019.83

Date of Public Distribution/Dissemination
08 / 27 / 2014
Amount 11169.66
Transaction ID : B510990
Date of Disbursement or Obligation
08 / 27 / 2014
Disbursement For: Primary [] General [X]
Other (specify)

(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.
Aletheia Henry
[Electronically Filed]
Date 09 / 18 / 2014
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
76 Words
MEMO ITEM
Mailing Address
1720 Eye Street NW, Ste 550
City
Washington State
DC Zip Code
20006
Purpose of Expenditure
Production of online ads. See Schedule D
Category/Type
004
Name of Federal Candidate
Thom Tillis
Support
Office Sought:
Senate State:
NC
Calendar Year-To-Date
Per Election for Office Sought
59594.57

Date of Public Distribution/Dissemination
08 / 27 / 2014
Amount
22339.34
Transaction ID : B510991
Date of Disbursement or Obligation
08 / 27 / 2014
Disbursement For:
General
2014

Full Name of Payee
The Feldman Group Inc.
MEMO ITEM
Mailing Address
508-510 8th St. SE
City
Washington State
DC Zip Code
20003
Purpose of Expenditure
Messaging research. See Schedule D
Category/Type
004
Name of Federal Candidate
Kay Hagan
Support
Office Sought:
Senate State:
NC
Calendar Year-To-Date
Per Election for Office Sought
240019.83

Date of Public Distribution/Dissemination
08 / 27 / 2014
Amount
10333.33
Transaction ID : B510992
Date of Disbursement or Obligation
08 / 27 / 2014
Disbursement For:
General
2014

(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.

Aletheia Henry
[Electronically Filed]
Date
09 / 18 / 2014
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
The Feldman Group Inc.
MEMO ITEM
Mailing Address 508-510 8th St. SE
City Washington State DC Zip Code 20003
Purpose of Expenditure Messaging research. See Schedule D
Category/Type 004
Name of Federal Candidate Thom Tillis
Support
Office Sought: Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 59594.57

Date of Public Distribution/Dissemination 08 / 27 / 2014
Amount 20666.67
Transaction ID : B510993
Date of Disbursement or Obligation 08 / 27 / 2014
Disbursement For: General 2014

Full Name of Payee
Analyst Institute LLC
MEMO ITEM
Mailing Address 815 16th Street, NW
City Washington State DC Zip Code 20006
Purpose of Expenditure Testing of online ads. See Schedule D
Category/Type 004
Name of Federal Candidate Kay Hagan
Support
Office Sought: Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 240019.83

Date of Public Distribution/Dissemination 08 / 27 / 2014
Amount 1665.00
Transaction ID : B510994
Date of Disbursement or Obligation 08 / 27 / 2014
Disbursement For: General 2014

(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.

Aletheia Henry
[Electronically Filed]
Date 09 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Analyst Institute LLC [MEMO ITEM]	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 27 / 2014
Mailing Address 815 16th Street, NW	Amount 3335.00
City Washington State DC Zip Code 20006	Transaction ID : B510995 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 27 / 2014
Purpose of Expenditure Testing of online ads. See Schedule D	Category/Type 004
Name of Federal Candidate Thom Tillis	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 59594.57	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Rising Tide Interactive [MEMO ITEM]	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 27 / 2014
Mailing Address 901 New York Ave NW #470 East	Amount 4819.25
City Washington State DC Zip Code 20001	Transaction ID : B510996 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 27 / 2014
Purpose of Expenditure Online advertising. See Schedule D	Category/Type 004
Name of Federal Candidate Kay Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 240019.83	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(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.

Aletheia Henry **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 09 / 18 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Rising Tide Interactive [MEMO ITEM]	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 27 / 2014
Mailing Address 901 New York Ave NW #470 East	Amount 9638.50
City State Zip Code Washington DC 20001	Transaction ID : B510997 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 27 / 2014
Purpose of Expenditure Online advertising. See Schedule D	Category/Type 004
Name of Federal Candidate Thom Tillis	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 59594.57	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address	Amount _____
City State Zip Code	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure	Category/Type _____
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought _____	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	_____
(c) TOTAL Independent Expenditures..... ▶	86926.64

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.

Aletheia Henry **[Electronically Filed]** Date M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Signature _____