

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Planned Parenthood Action Fund Inc. PAC

ADDRESS (number and street)

1780 Massachusetts Ave. NW

☐Check if different
than previously
reported. (ACC)

Washington

DC

20036

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00314617

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☒

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

☐☐☐in the
State of☐(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the
State of☐

5. Covering Period

04

01

2006

through

04

30

2006

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

Norman Greene

Signature of Treasurer

Electronically Filed by Norman Greene

Date

04

12

2007

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

Office Use Only							
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FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Planned Parenthood Action Fund Inc. PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	4	3	0	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		50028.84
(b) Cash on Hand at Beginning of Reporting Period	62771.68	
(c) Total Receipts (from Line 19)	5490.65	30816.43
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	68262.33	80845.27
7. Total Disbursements (from Line 31)	4169.91	16752.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	64092.42	64092.42
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Planned Parenthood Action Fund Inc. PAC

Report Covering the Period:

From:

M M
0 4D D
0 1Y Y Y Y
2 0 0 6

To:

M M
0 4D D
3 0Y Y Y Y
2 0 0 6

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	5000.00	24600.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	155.00	4804.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	5155.00	29404.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	5155.00	29404.00
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)	171.28	826.36
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	164.37	586.07
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5490.65	30816.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5490.65	30816.43

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		169.91	1687.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		169.91	1687.85
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		4000.00	14500.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	565.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	565.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		4169.91	16752.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		4169.91	16752.85

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)	5155.00	29404.00
34. Total Contribution Refunds (from Line 28(d))	0.00	565.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5155.00	28839.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	169.91	1687.85
37. Offsets to Operating Expenditures (from Line 15, page 3)	171.28	826.36
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-1.37	861.49

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

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

FOR LINE NUMBER: PAGE 6 / 12

(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 Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)
Ms. Lenore S Maslia

Mailing Address 2575 Peachtree Rd. NE Apt. 16-G

City State Zip Code
Atlanta GA 30305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

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
0 4 / 1 0 / 2 0 0 6

Transaction ID: A2006-718162

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 / 12

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)

Planned Parenthood Action Fund Inc.

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.45

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 5 / 2 0 0 6

Transaction ID: A5394

Amount of Each Receipt this Period

1.37

Reimbursement for Bank Fees

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

Planned Parenthood Action Fund Inc.

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

726.65

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 5 / 2 0 0 6

Transaction ID: A5393

Amount of Each Receipt this Period

70.20

Reimbursement for Bank Fees

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

Planned Parenthood Action Fund Inc.

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.31

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 9 / 2 0 0 6

Transaction ID: A5392

Amount of Each Receipt this Period

21.66

Reimbursement for Bank Fees

SUBTOTAL of Receipts This Page (optional)

93.23

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 12

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)

Planned Parenthood Action Fund Inc.

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

826.36

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 6 / 2 0 0 6

Transaction ID: A5391

Amount of Each Receipt this Period

78.05

Reimbursement for Bank Fees

SUBTOTAL of Receipts This Page (optional)

78.05

TOTAL This Period (last page this line number only)

171.28

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 12

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)
Bank of New York

Mailing Address One Wall Street

City State Zip Code
New York NY 10286

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.07

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: A5390

Amount of Each Receipt this Period

164.37

Bank Interest Earned

SUBTOTAL of Receipts This Page (optional)

164.37

TOTAL This Period (last page this line number only)

164.37

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)

PAGE 10 / 12

<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

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NAME OF COMMITTEE (In Full)

Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial)

A. Citicorp Payment Services Inc.

Mailing Address 14000 Citi Cards Way

City Jacksonville State FL Zip Code 32258

Purpose of Disbursement

Merchant Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: FL District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B141237

Date of Disbursement

04 / 04 / 2006

Amount of Each Disbursement this Period

35.20

Full Name (Last, First, Middle Initial)

B. Citicorp Payment Services Inc.

Mailing Address 14000 Citi Cards Way

City Jacksonville State FL Zip Code 32258

Purpose of Disbursement

Merchant Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: FL District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B141238

Date of Disbursement

04 / 04 / 2006

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

C. First Data Merchant Services

Mailing Address P.O. Box 6600

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement

Equipment Lease

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: MD District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B141239

Date of Disbursement

04 / 10 / 2006

Amount of Each Disbursement this Period

78.05

SUBTOTAL of Disbursements This Page (optional)

148.25

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 12

<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

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NAME OF COMMITTEE (In Full)

Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial)

A. First Data Merchant Services

Mailing Address P.O. Box 6600

City
Hagerstown

State
MD

Zip Code
21740

Purpose of Disbursement
Merchant Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: MD

District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B141240

Date of Disbursement

04 / 17 / 2006

Amount of Each Disbursement this Period

19.99

Full Name (Last, First, Middle Initial)

B. First Data Merchant Services

Mailing Address P.O. Box 6600

City
Hagerstown

State
MD

Zip Code
21740

Purpose of Disbursement
Merchant Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: MD

District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B141241

Date of Disbursement

04 / 17 / 2006

Amount of Each Disbursement this Period

1.67

SUBTOTAL of Disbursements This Page (optional)

21.66

TOTAL This Period (last page this line number only)

169.91

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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NAME OF COMMITTEE (In Full)

Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial)

A. Friends of Sherrod Brown

Mailing Address 2280 Kresge Drive Ste. 800

City Amherst State OH Zip Code 44001

Purpose of Disbursement
P-2006 U.S. Senate OH

Candidate Name
Sherrod Brown

Office Sought: ☐ House
☒ Senate
☐ President

State: OH

District:

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B141246

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

4000.00