06/06/2017 17:50

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## FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

, (A) (I II I I I I I I I I I I I I I I I I		7
(a) Name of Individual, Organization or Corporation     NARAL Pro-Choice America		
(b) Address (number and street) check if different than previ	ously reported	
(c) City, State and ZIP Code		0 FF011 W W N 1
Washington	DC 20005	3. FEC Identification Number
2. Occupation and Name of Employer (for Individual Filers Only)		C C90004185
October 15 Quarterly Report  January 31 Year-End Report	2017	
TOTAL CONTRIBUTIONS  7. TOTAL INDEPENDENT EXPENDITURES		0.00
TOTAL MADE! ENDENT EXTENDITIONED		49677.89
Under penalty of perjury I certify that the independent expenditures reported herein of, any candidate or authorized committee or agent of either, or any political party		or concert with, or at the request or suggestion
TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE [Ele	DATE ctronically Filed]
Robinson, Kimberly, , ,	Robinson, Kimberly, , ,	06/06/2017
NOTE: Submission of false, erroneous or incomplete information m	nay subject the person signing this report to	the penalties of 2 U.S.C. §437g.

## SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 3 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) NARAL Pro-Choice America			
Full Name (Last, First, Middle Initial) of Pa	yee		Date of Public Distribution/Dissemination
Facebook			M = M / D = D / Y = Y = Y
Mailing Address 156 University Ave			06 06 2017
136 University Ave			Amount
City	State	Zip Code	26510.01
Palo Alto	CA	94301-1688	Transaction ID : VN7C2A8F080
Purpose of Expenditure Online advertising & production		Category/ Type	Office Sought: X House State: GA
			Senate District: 06
Name of Federal Candidate Supported or HANDEL, KAREN CHRISTINE, , ,	Opposed by Expend	iture:	Check One: President  Support Oppose
Calendar Year-To-Date Per Election for Office Sought	1 1 1	36187.90	Disbursement For: Primary General 2017  Cother (specify) Run-off General
Full Name (Last, First, Middle Initial) of Pa	yee		Date of Public Distribution/Dissemination
Gumbinner Davies & Simpson			M = M / D = D / Y = Y = Y
Mailing Address 2001 S St NW			06 06 2017
Ste 301			Amount
City	State	Zip Code	9677.89
Washington	DC	20009-1164	Transaction ID: VN7C2A8F098
Purpose of Expenditure Printing and postage		Category/ Type	Office Sought: House State: GA Senate 06
Name of Federal Candidate Supported or HANDEL, KAREN CHRISTINE, , ,	Opposed by Expend	liture:	President District:  Check One: Support    Oppose
Calendar Year-To-Date Per Election for Office Sought	1 1	36187.90	Disbursement For: Primary General 2017
Full Name (Last, First, Middle Initial) of Pa	yee		Date of Public Distribution/Dissemination
New Media Firm			05 31 2017
Mailing Address 1730 Rhode Island Ave	NW		Amount
City	State	Zip Code	6775.00
Washington	DC	20036-3101	Transaction ID : VN7C2A8F064
Purpose of Expenditure Online advertising & production		Category/	Office Sought:  House  State: GA
Name of Federal Candidate Supported or	Onnosed by Expend	Type	Senate District: 06 President
HANDEL, KAREN CHRISTINE, , ,		intaro.	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		13489.99	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Ex	penditures		42962.90
(b) SUBTOTAL of Unitemized Independent	Expenditures		····· >
(c) TOTAL Independent Expenditures			

## SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 3 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) NARAL Pro-Choice America		
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination	
New Media Firm	06 02 2017	
Mailing Address 1730 Rhode Island Ave NW	Amount	
City State Zip Code	274400	
Washington DC 20036-3101	6714.99  Transaction ID: VN7C2A8F072	
Purpose of Expenditure Online advertising & production  Category/ Type	Office Sought:   House State: GA  Senate District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure: HANDEL, KAREN CHRISTINE, , ,	President  Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2016 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination	
Mailing Address	M = M / D = D / Y = Y = Y	
	Amount	
City State Zip Code		
Purpose of Expenditure  Category/ Type	Office Sought: House State:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:  Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination	
	M M / D D / Y Y Y Y	
Mailing Address		
	Amount	
City State Zip Code		
Purpose of Expenditure  Category/ Type	Office Sought: House State:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:	
	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	6714.99	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	49677.89	