01/29/2015 16:30 Image# 15950150533 PAGE 1 / 17

#### FEC FORM 5

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

To Be Used by Persons (Other than Political Committees)

(a) Name of Individual, Organization or Corporation		
Planned Parenthood Advocates Mar Monte		
(b) Address (number and street) check if different than previous The Alameda	iously reported	
(c) City, State and ZIP Code		3. FEC Identification Number
San Jose	CA 95126	3. FEC Identification Number
Occupation and Name of Employer (for Individual Filers Only)		C C90007311
, , , , , , , , , , , , , , , , , , ,		
4. TYPE OF REPORT (check appropriate boxes):  (a) April 15 Quarterly Report  July 15 Quarterly Report  October 15 Quarterly Report  January 31 Year-End Report  b) Is this Report an amendment? No  THROUGH  THROUGH  THROUGH	24-Hour Report  48-Hour Report  Yes, it amends the report filed on  7 2014	M / D D / Y Y Y Y
6. TOTAL CONTRIBUTIONS		3054.60
7. TOTAL INDEPENDENT EXPENDITURES		95462.81
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	_	DATE ctronically Filed]
Liz Figueroa	Liz Figueroa	01/28/2015
NOTE: Submission of false, erroneous or incomplete information n	nay subject the person signing this report to	the penalties of 2 U.S.C. §437g.

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

#### SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE 2 OF 17

			not be sold or used by any pedress of any political committee		
NAME OF FILER Planned Parentho	(In Full) od Advocates Mar Monte				
A. Full Name (Last, I	,	anad Parantha	ad Affiliator of California	Date of Resoint	
	in California, A Project of Plar 55 Capitol Mall, Suite 1425	ined Parentho	od Allillates of California	Date of Receipt	/ <b>Y = Y = Y = Y</b>
	OS Capitol Mail, Suite 1425			10 01	2014
City Sacramento		State CA	Zip Code 95814	Transaction ID : NO	
	f contribution	_		Amount of Each Rece	eipt this Period
FEC ID number o federal political co		С			2187.50
Name of Employe	r		Occupatio	n	
B. Full Name (Last, F Protecting Choice	First, Middle Initial) in California, A Project of Plan	ned Parentho	od Affiliates of California	Date of Receipt	
Mailing Address	555 Capitol Mall, Suite 1425			Date of neceipt	/ <b>Y                                   </b>
				10 01	2014
City Sacramento		State CA	Zip Code 95814	Transaction ID : NO	
FEC ID number of	f contributing			Amount of Each Rece	
federal political co	S .	С			153.13
Name of Employe	r		Occupation	n	
C Full Name (Least 1	The A. B. Micheller, Letter 10			Т	
C. Full Name (Last, F Protecting Choice	in California, A Project of Plan	ned Parenthoo	od Affiliates of California	Date of Receipt	
Mailing Address	555 Capitol Mall, Suite 1425			M = M / D = D	/ Y = Y = Y
City		State	Zip Code	10 01	2014
Sacramento		CA	95814	Amount of Each Rece	
FEC ID number of federal political co	•	С			3.96
Name of Employe	r		Occupation	n	
D. Full Name (Last, F	First, Middle Initial) in California, A Project of Plar	ned Parentho	od Affiliates of California		
	555 Capitol Mall, Suite 1425			Date of Receipt	
				10 01	2014
City Sacramento		State CA	Zip Code 95814	Transaction ID : NO	
-	Constalleration		55014	Amount of Each Rece	eipt this Period
FEC ID number of federal political co	•	С			156.25
Name of Employe	r		Occupation	n	
SUBTOTAL of Rece	ipts This Page (optional)			<b>&gt;</b>	2500.84
TOTAL TI: 5 : .	(lask as as as as a second of the contract of	0)		4-1-4-1-1	4 4
I I UIAL This Period	(last page carry total to Line	o)		·· •	4 4

#### SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE 3 OF 17

y imormation copied nom such Reports	and Statements may not be cold or used by any a	arean for the nurnose of coliniting contributions
for commercial purposes, other than us	and Statements may not be sold or used by any pring the name and address of any political committee	
NAME OF FILER (In Full) Planned Parenthood Advocates Mar Mo	onte	
Full Name (Last, First, Middle Initial)		
	ct of Planned Parenthood Affiliates of California	Date of Receipt
Mailing Address 555 Capitol Mall, Suite		10 16 2014
City Sacramento	State Zip Code CA 95814	Transaction ID : NONC228
Sacramento	O/1 30014	Amount of Each Receipt this Period
FEC ID number of contributing ederal political committee.	C	10.56
Name of Employer	Occupation	on
Full Name (Last, First, Middle Initial) Protecting Choice in California. A Proiec	ct of Planned Parenthood Affiliates of California	Date of Baselin
A 20 A 1 I		Date of Receipt
Mailing Address 555 Capitol Mall, Suit	E 1425	10 16 2014
City	State Zip Code	Transaction ID : NONC231
Sacramento	CA 95814	Amount of Each Receipt this Period
FEC ID number of contributing ederal political committee.	C	118.77
Name of Employer	Occupation	11
Full Name (Last, First, Middle Initial) Protecting Choice in California, A Projec	et of Planned Parenthood Affiliates of California	Date of Receipt
Full Name (Last, First, Middle Initial) Protecting Choice in California, A Projec	et of Planned Parenthood Affiliates of California	
Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit	et of Planned Parenthood Affiliates of California	Date of Receipt
Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit	et of Planned Parenthood Affiliates of California	Date of Receipt  10  16  2014
Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit City Sacramento FEC ID number of contributing	et of Planned Parenthood Affiliates of California e 1425 State Zip Code	Date of Receipt  10 16 2014  Transaction ID: NONC251
Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit City Sacramento FEC ID number of contributing federal political committee.	et of Planned Parenthood Affiliates of California e 1425 State Zip Code CA 95814	Date of Receipt  10 16 2014  Transaction ID : NONC251  Amount of Each Receipt this Period  218.75
Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit Dity Sacramento FEC ID number of contributing ederal political committee. Name of Employer	et of Planned Parenthood Affiliates of California e 1425  State Zip Code CA 95814  C	Date of Receipt  10 16 2014  Transaction ID : NONC251  Amount of Each Receipt this Period  218.75
Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit City Sacramento FEC ID number of contributing ederal political committee. Name of Employer Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project	et of Planned Parenthood Affiliates of California e 1425  State Zip Code CA 95814  C  Occupation et of Planned Parenthood Affiliates of California	Date of Receipt  10 16 2014  Transaction ID: NONC251  Amount of Each Receipt this Period  218.75
Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit City Sacramento FEC ID number of contributing ederal political committee. Name of Employer Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit	et of Planned Parenthood Affiliates of California e 1425  State Zip Code CA 95814  C  Occupation et of Planned Parenthood Affiliates of California	Date of Receipt  10 16 2014  Transaction ID: NONC251  Amount of Each Receipt this Period  218.75  Date of Receipt  11 01 2014
Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit City Sacramento FEC ID number of contributing ederal political committee. Name of Employer Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit	et of Planned Parenthood Affiliates of California e 1425  State Zip Code CA 95814  C  Occupation et of Planned Parenthood Affiliates of California e 1425	Date of Receipt  10 16 2014  Transaction ID: NONC251  Amount of Each Receipt this Period  218.75
Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit City Sacramento FEC ID number of contributing ederal political committee. Name of Employer Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit City Sacramento FEC ID number of contributing	et of Planned Parenthood Affiliates of California e 1425  State Zip Code CA 95814  C  Occupation et of Planned Parenthood Affiliates of California e 1425  State Zip Code	Date of Receipt  10 16 2014  Transaction ID : NONC251  Amount of Each Receipt this Period  218.75  Date of Receipt  11 01 2014  Transaction ID : NONC252
Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit City Sacramento FEC ID number of contributing dederal political committee. Name of Employer  Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit City Sacramento FEC ID number of contributing dederal political committee.	et of Planned Parenthood Affiliates of California e 1425  State Zip Code CA 95814  C  Occupation et of Planned Parenthood Affiliates of California e 1425  State Zip Code CA 95814	Date of Receipt  Transaction ID: NONC251  Amount of Each Receipt this Period  218.75  Date of Receipt  11 01 2014  Transaction ID: NONC252  Amount of Each Receipt this Period  202.38
Mailing Address 555 Capitol Mall, Suit  City Sacramento  FEC ID number of contributing federal political committee.  Name of Employer  Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project Mailing Address 555 Capitol Mall, Suit  City Sacramento  FEC ID number of contributing federal political committee.  Name of Employer	ct of Planned Parenthood Affiliates of California e 1425  State Zip Code CA 95814  C  Occupation  et of Planned Parenthood Affiliates of California e 1425  State Zip Code CA 95814  C  C  C  C  C  C  C  C  C  C  C  C  C	Date of Receipt  Transaction ID: NONC251  Amount of Each Receipt this Period  218.75  Date of Receipt  11 01 2014  Transaction ID: NONC252  Amount of Each Receipt this Period  202.38

# SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE	4	OF	17
IAGE	4	OI.	1/

Protecting Choice in California, A Project of Planned Parenthood Affiliates of California  Mailing Address 555 Capitol Mall, Suite 1425  City State Zip Code 95814  FEC ID number of contributing federal political committee.  City State Zip Code 95814  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Date of Receipt  Transaction ID : NONC253  Amount of Each Receipt this Period  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code	ny information copied from such Depart	e and Statements may not be cold or used by any	person for the nurness of collection contributions
Full Name (Last, First, Middle Initial) Planned Parenthood Afficiates of California Mailing Address 555 Capitol Mail, Suite 1425 City State Zip Code Gedral political committee.  Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Amount of Each Receipt this Period City State Zip Code City State Zip Code Amount of Each Receipt this Period City State Zip Code City State Zip Code Amount of Each Receipt this Period City State Zip Code City State Zip Code City State Zip Code Amount of Each Receipt this Period City State Zip Code Amount of Each Receipt this Period City State Zip Code			
Protecting Choice in California, A Project of Planned Parenthood Affiliates of California Mailing Address 555 Capitol Mall, Suite 1425  City State Zip Code Sacramento CA 95814  FEC ID number of contributing tederal political committee.  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Clay  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period	NAME OF FILER (In Full) Planned Parenthood Advocates Mar M	onte	
City State Zip Code  FEC ID number of contributing federal political committee.  City State Zip Code  Fill Name (Last, First, Middle Initial)  Full Name of Employer  Cocupation  Cocup	Full Name (Last, First, Middle Initial)		
City State Zip Code 95814  FEC ID number of contributing tederal political committee.  Class Tanger (Last, First, Middle Initial)  Full Name of Employer  C C Cocupation  Full Name (Last, First, Middle Initial)  Date of Receipt  Amount of Each Receipt this Period  Full Name of Employer  C C Cocupation  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Date of Receipt  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Date of Receipt  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Date of Receipt  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Date of Receipt  Amount of Each Receipt this Period  Full Name of Employer  C Cocupation			Date of Receipt
Sacramento CA 95814  Amount of Each Receipt this Period FEC ID number of contributing tederal political committee. CITY State Zip Code  Amount of Each Receipt this Period  CITY State Zip Code  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Amount of Each Receipt this Period  CITY State Zip Code  Amount of Each Receipt this Period  Amount of Each Receipt this Period  CITY State Zip Code  Amount of Each Receipt this Period  Amount of Each Receipt this Period  CITY  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Amount of Each Receipt this Period  CITY  Amount of Each Receipt this Period  Amount of Each Receipt this Period  CITY  Cocupation  Amount of Each Receipt this Period  Amount of Each Receipt this Period  CITY  Cocupation  CITY  Amount of Each Receipt this Period  Amount of Each Receipt this Period  CITY  COCUPATION  CITY  COCUPATION  Amount of Each Receipt this Period  CITY  COCUPATION  CITY  COCUPATION  CITY  COCUPATION  Amount of Each Receipt this Period  CITY  COCUPATION  CITY  COCUPATION  CITY  COCUPATION  Amount of Each Receipt this Period  CITY  COCUPATION  CITY  COCUPATION  CITY  COCUPATION  CITY  COCUPATION  CITY  COCUPATION  CITY			11 01 2014
FEC ID number of contributing federal political committee.  Full Name (Last, First, Middle Initial)  Mailing Address  City  State  Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  City  State  Zip Code  Amount of Each Receipt this Period  Amount of Each Receipt this Period  EC ID number of contributing federal political committee.  City  State  Zip Code  Amount of Each Receipt this Period  Amount of Each Receipt this Period  EC ID number of contributing federal political committee.  City  State  Zip Code  Amount of Each Receipt this Period  EC ID number of contributing federal political committee.  City  State  Zip Code  Amount of Each Receipt this Period  EC ID number of contributing federal political committee.  City  State  Zip Code  Amount of Each Receipt this Period  EC ID number of contributing federal political committee.  City  State  Zip Code  Amount of Each Receipt this Period  EC ID number of contributing federal political committee.  City  State  Zip Code  Amount of Each Receipt this Period  EC ID number of contributing federal political committee.  City  State  Zip Code  Amount of Each Receipt this Period  EC ID number of contributing federal political committee.  City  State  Zip Code	-		
Full Name (Last, First, Middle Initial)  Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Date of Receipt  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Date of Receipt  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State Zip Code		C	3.30
Mailing Address  City State Zip Code  Amount of Each Receipt this Period federal political committee.  Name of Employer  Occupation  Date of Receipt  Amount of Each Receipt this Period  City State Zip Code  Amount of Each Receipt this Period  Amount of Each Receipt this Period  City State Zip Code  Amount of Each Receipt  Amount of Each Receipt  Date of Receipt  Date of Receipt  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Date of Receipt  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Date of Receipt  Amount of Each Receipt this Period  City State Zip Code  Amount of Each Receipt this Period  Cocupation  Date of Receipt  Amount of Each Receipt this Period  Cocupation  Date of Receipt  Cocupation  Date of Receipt  Amount of Each Receipt this Period  Cocupation  Date of Receipt  Amount of Each Receipt this Period  Cocupation	Name of Employer	Occupation	on
Mailing Address  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  C Occupation  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Amount of Each Receipt this Period  Fec ID number of contributing federal political committee.  C Occupation  Date of Receipt  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  C Occupation  Date of Receipt  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  C Occupation  Date of Receipt  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation	Full Name (Last, First, Middle Initial)		
City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Occupation  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Occupation  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Occupation  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Occupation	Mailing Address		
Amount of Each Receipt this Period FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Date of Receipt  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Mailing Address  City  State  Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Date of Receipt  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State  Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State  Zip Code  Amount of Each Receipt this Period  C  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation		Olate 7: Oct	M = M / D = D / Y = Y = Y
FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Date of Receipt  Amount of Each Receipt this Period  FUI Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  Mailing Address  City  State  Zip Code  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Mailing Address  City  State  Zip Code  Amount of Each Receipt  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation	Сіту	State Zip Code	Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial)  Mailing Address  City  State  Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Date of Receipt  Amount of Each Receipt this Period  City  State  Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State  Zip Code  Amount of Each Receipt  Amount of Each Receipt  Amount of Each Receipt  Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation		C	
Date of Receipt  Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Date of Receipt  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial)  Date of Receipt this Period  Full Name (Last, First, Middle Initial)  Date of Receipt this Period  Full Name (Last, First, Middle Initial)  Date of Receipt this Period  Full Name (Last, First, Middle Initial)  Date of Receipt this Period  Full Name of Employer  Occupation  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation	Name of Employer	Occupation	on
FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Full Name (Last, First, Middle Initial)  Mailing Address  City  State  Zip Code  Amount of Each Receipt this Period  Amount of Each Receipt  Marker (Last, First, Middle Initial)  Date of Receipt  Amount of Each Receipt  Marker (Last, First, Middle Initial)  Date of Receipt  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation	Full Name (Last, First, Middle Initial)  Mailing Address		
FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Full Name (Last, First, Middle Initial)  Mailing Address  City  State  Zip Code  Amount of Each Receipt this Period  Amount of Each Receipt  Marker (Last, First, Middle Initial)  Date of Receipt  Amount of Each Receipt  Marker (Last, First, Middle Initial)  Date of Receipt  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation	City	State Zin Code	_ L L L
FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Full Name (Last, First, Middle Initial)  Mailing Address  City  State  Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Amount of Each Receipt this Period  Occupation  Substoctal C	Oity	State Zip Gode	Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial)  Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  3.30		C	
Mailing Address  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  3.30	Name of Employer	Occupation	on
Mailing Address  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  3.30	Full Name (Last, First, Middle Initial)		Date of Receipt
FEC ID number of contributing federal political committee.  Name of Employer  Occupation  SUBTOTAL of Receipts This Page (optional)  3.30	Mailing Address		<u> </u>
FEC ID number of contributing federal political committee.  Name of Employer  Occupation  SUBTOTAL of Receipts This Page (optional)  3.30	City	State Zin Code	_
FEC ID number of contributing federal political committee.  Name of Employer  Occupation  3.30		Citato Zip Code	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)		C	
	Name of Employer	Occupation	on
	SUBTOTAL of Receipts This Page (optic	onal)	▶ 3.30

PAGE 5 OF 17 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) Planned Parenthood Advocates Mar Monte				•		
i iailiieu Faleilliilouu Auvocales Mäi Monte						
Full Name (Last, First, Middle Initial) of Pay	100			Data of Bullin	Distribution	Disconsissation
Gloria Ritchie Associates, LLC	700			Date of Public		Dissemination
Mailing Address 4597 Hillo Stroot				10	15	2014
4587 Hilo Street				Amount		
City	State	Zip Code				5000.00
Fremont	CA	94538		Transaction II	D : EDTEAL	5000.00 .C282
Purpose of Expenditure		Category/	Off	fice Sought:	House	State: CA
Campaign Consulting for Mailer		Type			Senate	District:07
Name of Federal Candidate Supported or C	Opposed by Expend	liture:			President	
			Ch	eck One:	Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.02		sbursement For: 2014	Primary	General
	- 4	- 7	_	Other (spec	<b>▶</b>	
Full Name (Last, First, Middle Initial) of Pay	/ee			Date of Public	Distribution/	Dissemination
Gloria Ritchie Associates, LLC				10	15	2014
Mailing Address 4587 Hilo Street				Amount		
City	State	Zip Code		7 anodik	<del></del>	10000 00
Fremont	CA	94538		Transaction II	O · EDTEAL	13900.00
Purpose of Expenditure		Category/	Of	fice Sought:	House	State: CA
Mailer		Type 00	)1		Senate	District:07
Name of Federal Candidate Supported or C Ami Bera	Opposed by Expend	liture:	Ch	neck One:	President Support	Oppose
			Dis	sbursement For:	Primary	General
Calendar Year-To-Date Per Election for Office Sought		102062.0		2014 Other (spec		X denoral
Full Name (Last, First, Middle Initial) of Pay	/ee			Date of Public	Distribution/	Dissemination
Gloria Ritchie Associates, LLC				M = M /	D D /	Y
Mailing Address 4587 Hilo Street				10	20	2014
				Amount		
City	State	Zip Code		· · · · ·		3314.28
Fremont	CA	94538		Transaction II	D : EDTEAL	
Purpose of Expenditure Mailer		Category/	Off	ice Sought:	House	State: CA
Name of Federal Candidate Supported or 0	Onnosed by Evacad	Туре			Senate President	District:07
Doug Ose	Specifically Experie		Ch	eck One:	Support	X Oppose
Calendar Year-To-Date Per Election for Office Sought	1 1 1	102062.02		sbursement For: 2014 Other (spec	Primary  cify)	General
(a) SUBTOTAL of Itemized Independent Ex	penditures				1.7	22214.28
(b) SUBTOTAL of Unitemized Independent	Expenditures		·····••			
(c) TOTAL Independent Expenditures(carry total from last page forward			······································			

PAGE 6 OF 17 FOR LINE 7 OF FORM 5

AME OF FILER (In Full)						•	
Planned Parenthood Advocates Mar Monte							
T. S. W. Marrier / Last   Eirot   Middle   Initial) of D.							
Full Name (Last, First, Middle Initial) of Pa Gloria Ritchie Associates, LLC	ıyee					ublic Distribution	
Mailing Address					10	20	2014
Mailing Address 4587 Hilo Street					Amount		
City	State	Zip Code	<u> </u>		,		11.00
Fremont	CA	94538			Transact	ion ID : EDTEA	9942.84 <b>C296</b>
Purpose of Expenditure		Category/	204	Office	Sought:	House	State: CA
Mailer		Type	004		-	Senate	District:07
Name of Federal Candidate Supported or	Opposed by Expend	iture:				President	Diotriot
Ami Bera				Check	One:	Support	Oppose
Calendar Year-To-Date Per Election		400		Disbur	rsement Fo	or: Primary	<b>X</b> General
for Office Sought		1020	062.02		Other	(specify)	
Full Name (Last, First, Middle Initial) of Pa	ayee				Date of Pu	ublic Distribution	/Dissemination
Gloria Ritchie Associates, LLC					M = M		Y
Mailing Address 4587 Hilo Street					10	22	2014
				I	Amount		
City	State	Zip Code	,				12653.30
Fremont	CA	94538	_		Transacti	ion ID : EDTEAL	
Purpose of Expenditure Mailer		Category/ Type	004	Office	Sought:	X House Senate	State: CA 07
Name of Federal Candidate Supported or Doug Ose	Opposed by Expende	iture:		Check	k One:	President Support	District:
Calendar Year-To-Date Per Election for Office Sought		102	062.02	Disbur	rsement Fo 2014 Other	or: Primary 4 (specify)	General
Full Name (Last, First, Middle Initial) of Pa	ayee			_		ublic Distribution	/Dissemination
Gloria Ritchie Associates, LLC					M = M		Y
Mailing Address 4587 Hilo Street					10	24	2014
1007 1 1110 011001					Amount		
City	State	Zip Code	<del>,</del>				12811.31
Fremont	CA	94538			Tran <u>sact</u> i	ion ID : EDTEAL	
Purpose of Expenditure Mailer		Category/	004		Sought:	X House	State: CA
		Туре				Senate	District:07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expendi	iture:		Check	One:	President Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		102	062.02	Disbur	rsement Fo 2014 Other	or: Primary 4 (specify)	<b>General</b>
(a) SUBTOTAL of Itemized Independent Ex	xpenditures					, ,	35407.45
(b) SUBTOTAL of Unitemized Independent	Expenditures			···· •		, , , ,	
(c) TOTAL Independent Expenditures (carry total from last page forward				····· <b>&gt;</b>		, , , , , , , , , , , , , , , , , , ,	

PAGE 7 OF 17 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) Planned Parenthood Advocates Mar Monte						
Tanned Parenthood Advocates Ivial Iviolite						
Town Marca / not First Middle Initial) of [	2			<u> </u>		
Full Name (Last, First, Middle Initial) of P Gloria Ritchie Associates, LLC	ayee				Public Distribution	/Dissemination
Mailing Adalas a				1	0 24	2014
Mailing Address 4587 Hilo Street				Amount		
City	State	Zip Code			<del></del>	
Fremont	CA	94538		Transa	ection ID : EDTEAL	603.67 <b>C306</b>
Purpose of Expenditure		Category/		Office Sought		State: CA
Mailer		Type	004		Senate	District:07
Name of Federal Candidate Supported or	r Opposed by Expend	diture:			President	DISTRICT.
Doug Ose				Check One:	Support	X Oppose
Calendar Year-To-Date Per Election		1206		Disbursement		X General
for Office Sought		1020	062.02	Othe	or (specify)	
Full Name (Last, First, Middle Initial) of P	<sup>3</sup> ayee			Date of	Public Distribution	/Dissemination
Media Solutions				M		Y
Mailing Address 707 Commons Drive, So	 ouite 201				0 20	2014
				Amount		
City	State	Zip Code				17104.50
Sacramento	CA	95825		Transa	ction ID : EDTEAL	
Purpose of Expenditure Radio Ads		Category/ Type	004	Office Sought		State: CA
Name of Federal Candidate Supported or Ami Bera	r Opposed by Expend			Check One:	President  Support	District:
Calendar Year-To-Date Per Election for Office Sought		1020	062.02	Disbursement 20	For: Primary 014 Primary er (specify)	<b>General</b>
Full Name (Last, First, Middle Initial) of P	ayee				Public Distribution	/Dissemination
Media Solutions				М	M / D D /	Y . Y . Y . Y
Mailing Address 707 Commons Drive, S				1	0 20	2014
, <del>, , , , , , , , , , , , , , , , , , </del>	Juno 20 .			Amount		
City	State	Zip Code				1900.50
Sacramento	CA	95825		Transa	ction ID : EDTEAL	
Purpose of Expenditure Radio Ads		Category/	004	Office Sought:	: X House	State: CA
		Туре			Senate	District:07
Name of Federal Candidate Supported or Doug Ose	r Opposed by Expend	liture:		Check One:	President Support	X Oppose
Calendar Year-To-Date Per Election for Office Sought		1020	062.02	Disbursement 20 Othe	For: Primary Primary er (specify)	General
(a) SUBTOTAL of Itemized Independent E	Expenditures				7 1 1 7	19608.67
(b) SUBTOTAL of Unitemized Independen	ıt Expenditures			▶	7 1 7	
(c) TOTAL Independent Expenditures (carry total from last page forwar					<u> </u>	

PAGE 8 OF 17 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)			•
Planned Parenthood Advocates Mar Monte			
Full Name (Last, First, Middle Initial) of Pay	ree		Date of Public Distribution/Dissemination
Ogilvy Public Relations			M M / D D / Y Y Y
Mailing Address B O Roy 7247 7417			10 20 2014
P.O. Box 7247-7417			Amount
			Amount
City	State	Zip Code	599.50
Philadelphia	PA	19170	Transaction ID : EDTEALC299
Purpose of Expenditure Consulting for Radio Ads		Category/ Type 004	Office Sought: House State: CA
			Senate District: 07
Name of Federal Candidate Supported or C	Opposed by Expend	diture:	President
Doug Ose			Check One: Support Oppose
Calendar Year-To-Date Per Election			Disbursement For: Primary General
for Office Sought		102062.02	2014 Other (specify)
Full Name (Least First Middle Initial) of Day			
Full Name (Last, First, Middle Initial) of Pay	ree		Date of Public Distribution/Dissemination
Ogilvy Public Relations			10 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P.O. Box 7247-7417			2017
			Amount
City	State	Zip Code	5395.50
Philadelphia	PA	19170	Transaction ID : EDTEALC300
Purpose of Expenditure		Category/	Office Sought: House State: CA
Consulting for Radio Ads		Type 004	Senate 07
Name of Federal Candidate Supported or C	Opposed by Expend	diture:	President District:
Ami Bera	, ,		Check One: X Support Oppose
			Diskursenset For Driver V. Consul
Calendar Year-To-Date Per Election		102062.02	Disbursement For: Primary General
for Office Sought			Other (specify)
Full Name (Last, First, Middle Initial) of Pay	ree		Date of Public Distribution/Dissemination
Planned Parenthood Advocates Mar Monte			M - M / D - D / Y - Y - Y
Mailing Address 1605 The Alameda			10 01 2014
1003 THE Alameda			Amount
City	State	Zip Code	
San Jose	CA	95126	20.50
Purpose of Expenditure			Transaction ID : EDTEALC278  Office Sought: House State CA
Copies for Phone Banking; 10/1 - 10/9		Category/ Type 001	Senate 07
Name of Federal Condidate Supported or C	Innoced by Evaca		Senate District: 07 President
Name of Federal Candidate Supported or C Ami Bera	phhosea by Exheuc	inuie.	
Calendar Year-To-Date Per Election		102062.02	Disbursement For: Primary General
for Office Sought		102002.02	Other (specify)
(a) SUBTOTAL of Itemized Independent Exp	penditures		······· <b>b</b> 6015.50
(b) SUBTOTAL of Unitemized Independent B	Expenditures		
(c) TOTAL Independent Expenditures			
(carry total from last page forward			

PAGE 9 OF 17 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) Planned Parenthood Advocates Mar Monte				<u>,                                      </u>
i iaimeu Fareniinoou Auvocales Mar Monte				
Full Name (Last First Middle Initial) of De	WO.			
Full Name (Last, First, Middle Initial) of Pa Planned Parenthood Advocates Mar Monte				Date of Public Distribution/Dissemination
Mailing Address				10 01 2014
1605 The Alameda				Amount
City	State	Zip Code		45007
San Jose	CA	95126		458.27 Transaction ID : EDTEALC279
Purpose of Expenditure		Category/	002	Office Sought: X House State: CA
Food & Expenses for Phone Banking; 10/1	- 10/9	Туре	003	Senate District: 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expendit	ure:		President
Ailli Bela				Check One: Support Oppose
Calendar Year-To-Date Per Election		102062	2.02	Disbursement For: Primary General
for Office Sought		102002	2.02	Other (specify)
Full Name (Last, First, Middle Initial) of Pa	iyee			Date of Public Distribution/Dissemination
Planned Parenthood Advocates Mar Monte	•			10 01 2014
Mailing Address 1605 The Alameda				10 01 2014
				Amount
City	State	Zip Code		1146.00
San Jose	CA	95126		Transaction ID : EDTEALC281
Purpose of Expenditure Staff Time; 10/1 - 10/9		Category/ Type	003	Office Sought: House State: CA Senate 07
Name of Federal Candidate Supported or	Opposed by Expendit	ure.		Senate 07 President
Ami Bera	орросси ву Ехропии	.dio.		Check One: Support Oppose
				Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought		102062	2.02	2014 Other (specify)
Full Name (Last, First, Middle Initial) of Pa	ivee			Date of Public Distribution/Dissemination
Planned Parenthood Advocates Mar Monte	,			M M / D D / Y Y Y Y
Mailing Address				10 01 2014
1605 The Alameda				Amount
City	State	Zip Code		4044
San Jose	CA	95126		13.14 Transaction ID : EDTEALC310
Purpose of Expenditure		Category/	004	Office Sought: X House State: CA
Staff Time for Online Ads; 10/1 - 10/9		Туре	004	Senate District: 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expendit	ure:		President
				Check One: Support Oppose
Calendar Year-To-Date Per Election		102062	2.02	Disbursement For: Primary General
for Office Sought		102002		Other (specify)
(a) SURTOTAL of Homizad Indonesia Co	vnonditures			
(a) SUBTOTAL of Itemized Independent Ex	cpenditures			1617.41
(b) SUBTOTAL of Unitemized Independent	Expenditures			
(a, 222.22 or ormanized independent				
(c) TOTAL Independent Expenditures				>
(carry total from last page forward				

PAGE 10 OF 17 FOR LINE 7 OF FORM 5

AME OF FILED (In Fall)			
AME OF FILER (In Full) Planned Parenthood Advocates Mar Monte			
Full Name (Last, First, Middle Initial) of Pa	yee		Date of Public Distribution/Dissemination
Planned Parenthood Advocates Mar Monte			10 10 2014
Mailing Address 1605 The Alameda			Amount
Cia.	State	Zip Code	Allivan
City San Jose	CA	95126	4.00 Transaction ID : EDTEALC284
Purpose of Expenditure Copies for Phone Banking; 10/10 - 10/15		Category/ Type 001	Office Sought: House State: CA Senate District: 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expend	iture:	Check One: District: Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.02	Disbursement For: Primary General 2014 Other (specify)
Full Name (Last, First, Middle Initial) of Pa	iyee		Date of Public Distribution/Dissemination
Planned Parenthood Advocates Mar Monte	•		10 10 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
Mailing Address 1605 The Alameda			Amount
City	State	Zip Code	24.00
San Jose	CA	95126	61.20 Transaction ID : EDTEALC285
Purpose of Expenditure		Category/	Office Sought:  House State: CA
Food & Expenses for Phone Banking; 10/1		Type 003	Senate 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expend	iture:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.02	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Pa	iyee		Date of Public Distribution/Dissemination
Planned Parenthood Advocates Mar Monte	)		M M / D D / Y Y Y
Mailing Address 1605 The Alameda			10
City	State	Zip Code	, unear
San Jose	CA	95126	308.00
Purpose of Expenditure		Category/	Office Sought: House State: CA
Staff Time; 10/10 - 10/15	Opposed by Fynand	Type 003	Senate District: 07 President
Name of Federal Candidate Supported or Ami Bera	Opposed by Expend	iture:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.02	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Ex	rpenditures		373.20
(b) SUBTOTAL of Unitemized Independent	Expenditures		····· >
(c) TOTAL Independent Expenditures (carry total from last page forward			····· >

PAGE 11 OF 17 FOR LINE 7 OF FORM 5

IAME OF FILER (In Full)			l .
Planned Parenthood Advocates Mar Monte			
Full Name (Last, First, Middle Initial) of Pay	/ee		Date of Public Distribution/Dissemination
Planned Parenthood Advocates Mar Monte			10 10 2014
Mailing Address 1605 The Alameda			Amount
City	State	Zip Code	
San Jose	CA	95126	6.57 Transaction ID : EDTEALC5
Purpose of Expenditure Staff Time for Social Media; 10/10 - 10/15		Category/ Type 004	Office Sought: House State: CA Senate District: 07
Name of Federal Candidate Supported or 0 Ami Bera	Opposed by Expend	iture:	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	1 1 7	102062.02	Disbursement For: Primary General 2014 Other (specify)
Full Name (Last, First, Middle Initial) of Pay	/ee		Date of Public Distribution/Dissemination
Planned Parenthood Advocates Mar Monte			10 16 2014
Mailing Address 1605 The Alameda			Amount 2014
City	State	Zip Code	Alliount
		•	1763.50
San Jose	CA	95126	Transaction ID : EDTEALC288
Purpose of Expenditure Staff Time; 10/16 - 10/31		Category/ Type 003	Office Sought: House State: CA Senate Service 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expend	liture:	President  Check One:  Support  Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.02	Disbursement For: Primary General 2014 Other (specify)
Full Name (Last, First, Middle Initial) of Par	/ee		
Planned Parenthood Advocates Mar Monte	,,,,		Date of Public Distribution/Dissemination
Mailing Address 1605 The Alameda			10 16 2014
			Amount
City	State	Zip Code	05.05
San Jose	CA	95126	25.85 Transaction ID : EDTEALC290
Purpose of Expenditure		Category/	055 0 11 12 11
Copies for Phone Banking; 10/16 - 10/31		Type 001	Senate District: 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expend	liture:	Check One: President  Check One: Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.02	Disbursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Ex	penditures		1795.92
(b) SUBTOTAL of Unitemized Independent	Expenditures		······ <b>&gt;</b>
(c) TOTAL Independent Expenditures (carry total from last page forward			

PAGE 12 OF 17 FOR LINE 7 OF FORM 5

AME OF FILER (In Full)			<b>-</b>
Planned Parenthood Advocates Mar Monte			
Full Name (Last, First, Middle Initial) of Pay	<u></u>		Data of Dublic Distribution/Dissemination
Planned Parenthood Advocates Mar Monte	<del>ee</del>		Date of Public Distribution/Dissemination
Mailing Address 1605 The Alameda			10 16 2014
1000 1110 / 11111000			Amount
City	State	Zip Code	024.26
San Jose	CA	95126	924.36 Transaction ID : EDTEALC291
Purpose of Expenditure Food & Expenses for Phone Banking; 10/16	-10/31	Category/ Type 003	Office Sought: House State: CA Senate District: 07
Name of Federal Candidate Supported or C Ami Bera	opposed by Expendi	iture:	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.02	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Pay	'ee		Date of Public Distribution/Dissemination
Planned Parenthood Advocates Mar Monte			M M / D D / Y Y Y Y
Mailing Address 1605 The Alameda			10 16 2014
	21-1-		Amount
City	State	Zip Code	98.55
San Jose	CA	95126	Transaction ID : EDTEALC294
Purpose of Expenditure Staff Time for Social Media; 10/16 - 10/31		Category/ Type 004	Office Sought: House State: CA Senate District: 07
Name of Federal Candidate Supported or C Ami Bera	Opposed by Expending	iture:	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.02	Disbursement For: Primary General 2014 Other (specify)
Full Name (Last, First, Middle Initial) of Pay	/ee		Date of Public Distribution/Dissemination
Planned Parenthood Advocates Mar Monte			M M / D D / Y Y Y Y
Mailing Address 1605 The Alameda			10 31 2014
			Amount
City	State	Zip Code	26.28
San Jose	CA	95126	Transaction ID : EDTEALC307
Purpose of Expenditure Website; 11/1 - 11/4		Category/ Type 004	Office Sought: House State: CA Senate District: 07
Name of Federal Candidate Supported or C	Opposed by Expend	iture:	President District:
Ami Bera			Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.02	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Exp	penditures		1049.19
(b) SUBTOTAL of Unitemized Independent E	Expenditures		····· >
(c) TOTAL Independent Expenditures(carry total from last page forward			

PAGE 13 OF 17 FOR LINE 7 OF FORM 5

AME OF FILER (In Full)				·
Planned Parenthood Advocates Mar Monte				
Full Name (Last, First, Middle Initial) of Pa	ayee			Date of Public Distribution/Dissemination
Planned Parenthood Advocates Mar Mont	e			10 31 2014
Mailing Address 1605 The Alameda				Amount 2014
Oth.	State	Zip Code		Amount
City San Jose	CA	2ip Code 95126		281.37 Transaction ID : EDTEALC308
Purpose of Expenditure Staff Time & Expenses for GOTV; 11/1 - 1	1/4	Category/ Type	004	Office Sought:
Name of Federal Candidate Supported or Ami Bera	Opposed by Expend	liture:		President  Check One:  Support  Oppose
Calendar Year-To-Date Per Election for Office Sought		10206	62.02	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Pa	ayee			Date of Public Distribution/Dissemination
Planned Parenthood Affiliates of California	i			M+M / D+D / Y-Y-Y-Y
Mailing Address 555 Capitol Mall, Suite 5	510			10 01 2014
City	State	Zip Code		Amount
Sacramento	CA	2ip Code 95814		153.13
Purpose of Expenditure				Transaction ID : EDTEALC276  Office Sought:
Staff Time; 10/1 - 10/18		Category/ Type	001	Senate District:
Name of Federal Candidate Supported or Ami Bera	Opposed by Expend	iture:		President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		1020	62.02	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Pa	avee			Date of Public Distribution/Dissemination
Planned Parenthood Affiliates of California	-			M M / D D / Y Y Y
Mailing Address 555 Capitol Mall, Suite	510			10 01 2014 Amount
City	State	Zip Code		
Sacramento	CA	95814		3.96 Transaction ID : EDTEALC311
Purpose of Expenditure Voter Guide; 10/1 - 10/15		Category/ Type	004	Office Sought: House State: CA
Name of Federal Candidate Supported or	Onnosed by Expend			Senate District: 07  President
Ami Bera				Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		10206	62.02	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent E	xpenditures			438.46
(b) SUBTOTAL of Unitemized Independent	t Expenditures			
(c) TOTAL Independent Expenditures (carry total from last page forwar				

PAGE 14 OF 17 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) Planned Parenthood Advocates Mar Monte				<b>'</b>
i iaiilieu paleiitiiluuu Auvucates iviai ivionte				
Full Name (Last, First, Middle Initial) of Pa	2000			Data of Ballia Bistillation (Bissanisation
Planned Parenthood Affiliates of California	iyee			Date of Public Distribution/Dissemination
Mailing Address 555 Capital Mall Suito 5	40			10 16 2014
555 Capitol Mall, Suite 5	10			Amount
City	State	Zip Code		140.77
Sacramento	CA	95814		118.77 Transaction ID : EDTEALC292
Purpose of Expenditure		Category/	001	Office Sought: X House State: CA
Staff Time; 10/16 - 10/31		Туре	001	Senate District: 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expend	diture:		President
				Check One: Support Oppose
Calendar Year-To-Date Per Election		102062		Disbursement For: Primary General
for Office Sought		, , , , ,		Other (specify)
Full Name (Last, First, Middle Initial) of Pa	ayee			Date of Public Distribution/Dissemination
Planned Parenthood Affiliates of California				10 16 2014
Mailing Address 555 Capitol Mall, Suite 5	10			
City	State	Zip Code		Amount
Sacramento	CA	95814		10.56
Purpose of Expenditure	<u> </u>	Category/		Transaction ID : EDTEALC293  Office Sought:
Online Voter Guide; 10/16 - 10/31		Type	004	Senate 07
Name of Federal Candidate Supported or	Opposed by Expend	diture:		President District:
Ami Bera				Check One: Support Oppose
Calendar Year-To-Date Per Election		40000		Disbursement For: Primary General
for Office Sought		102062	2.02	Other (specify)
Full Name (Last, First, Middle Initial) of Pa	ayee			Date of Public Distribution/Dissemination
Planned Parenthood Affiliates of California				M M / D D / Y Y Y Y
Mailing Address 555 Capitol Mall, Suite 5	510			11 01 2014
				Amount
City	State	Zip Code		3.30
Sacramento	CA	95814		Transaction ID : EDTEALC314
Purpose of Expenditure Online Voter Guide; 11/1 - 11/4		Category/ Type	004	Office Sought: House State: CA
Name of Federal Candidate Supported or	Onnosed by Evnor			Senate District: 07 President
Ami Bera	Opposed by Expend	aitui 6.		Check One: Support Oppose
Calendar Year-To-Date Per Election				Disbursement For: Primary General
for Office Sought		102062	2.02	Other (specify)
(a) CURTOTAL of Harriand Indones days 5	vn on diture c			
(a) SUBTOTAL of Itemized Independent Ex	xpenaitures			132.63
(b) SUBTOTAL of Unitemized Independent	Expenditures			
, , , , , , , , , , , , , , , , , , ,	F - 2000			
(c) TOTAL Independent Expenditures				
(carry total from last page forward	d to Line 7)			

PAGE 15 OF 17 FOR LINE 7 OF FORM 5

AME OF FILER (In Full)				L
Planned Parenthood Advocates Mar Monte				
Full Name (Last, First, Middle Initial) of Pa	yee			Date of Public Distribution/Dissemination
Political Data				10 01 2014
Mailing Address P.O. Box 59570				Amount
City	State	Zip Code		
Norwalk	CA	90652		2187.50 Transaction ID : EDTEALC274
Purpose of Expenditure Data for Phone Banking; 10/1 - 10/18.		Category/ Type 0	003	Office Sought: House State: CA Senate District: 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expendi	I iture:		President  Check One:  Support  Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.0		Disbursement For: Primary General 2014 Other (specify)
Full Name (Last, First, Middle Initial) of Pa	yee			Date of Public Distribution/Dissemination
Progressive Contact Technologies, Inc.				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P.O. Box 59570				10
City	State	Zip Code		
Norwalk	CA	90652		333.00 Transaction ID : EDTEALC280
Purpose of Expenditure Phone Banking; 10/1 - 10/9		Category/ Type 00	03	Office Sought: House State: CA Senate 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expendi	iture:		President District:  Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.0		Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Pa	yee			Date of Public Distribution/Dissemination
Progressive Contact Technologies, Inc.				10 10 2014
Mailing Address P.O. Box 59570				Amount
City	State	Zip Code		72.00
Norwalk	CA	90652		72.00 Transaction ID : EDTEALC287
Purpose of Expenditure Phone Banking; 10/10 -10/15		Category/ Type 0	003	Office Sought: House State: CA
Name of Federal Candidate Supported or	Opposed by Expendi			Senate District: 07 President
Ami Bera	Орросси од Елре	ituro.	(	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.0		Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Ex	penditures			2592.50
(b) SUBTOTAL of Unitemized Independent	Expenditures			<b>•</b>
(c) TOTAL Independent Expenditures (carry total from last page forward				<b>•</b>

PAGE 16 OF 17 FOR LINE 7 OF FORM 5

IAME OF FILER (In Full)			
Planned Parenthood Advocates Mar Monte			
Full Name (Last, First, Middle Initial) of Pa	VAA		Data of Dublic Distribution/Discouring tion
Progressive Contact Technologies, Inc.	yee		Date of Public Distribution/Dissemination
Mailing Address P.O. Box 59570			10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
P.O. BOX 59570			Amount
City	State	Zip Code	795.00
Norwalk	CA	90652	Transaction ID : EDTEALC289
Purpose of Expenditure Phone Banking; 10/16 - 10/31		Category/ Type 003	Office Sought: House State: CA Senate Signate: 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expend	liture:	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.02	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Pa	yee		Date of Public Distribution/Dissemination
Stones Phones, Inc.			10 31 2014
Mailing Address 41-750 Rancho Las Palm	nas Drive		Amount
City	State	Zip Code	
Rancho Mirage	CA	92270	3047.60
Purpose of Expenditure	-	Category/	Transaction ID : EDTEALC309  Office Sought:
Phone Banking for GOTV; 11/1 - 11/4		Type 004	Senate District: 07
Name of Federal Candidate Supported or Ami Bera	Opposed by Expend	liture:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.02	Disbursement For: Primary General 2014 General
Full Name (Last, First, Middle Initial) of Pa	yee		Date of Public Distribution/Dissemination
Wagaman Strategies			M = M / D = D / Y = Y = Y
Mailing Address 886 Metal Lane			10 01 2014
000			Amount
City	State	Zip Code	156.25
West Sacramento	CA	95691	Transaction ID : EDTEALC312
Purpose of Expenditure		Category/	Office Sought: X House State: CA
Consulting for Phone Banking 10/1 - 10/15	Opposed by Fire	Type 001	Senate District: 07
Name of Federal Candidate Supported or Ami Bera	——————————————————————————————————————	e.	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		102062.02	Disbursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Ex	penditures		3998.85
(b) SUBTOTAL of Unitemized Independent	Expenditures		
(c) TOTAL Independent Expenditures(carry total from last page forward			

PAGE 17 OF 17 FOR LINE 7 OF FORM 5

AME OF FILER (In Full)	<u>.</u>
Planned Parenthood Advocates Mar Monte	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Wagaman Strategies	
Mailing Address	10 16 2014
Mailing Address 886 Metal Lane	
	Amount
City State Zip Code	218.75
West Sacramento CA 95691	Transaction ID : EDTEALC313
Purpose of Expenditure  Consulting for Phone Banking 10/16 - 10/31	Office Sought:
Consulting for Phone Banking 10/16 - 10/31 Type 001	Senate District: 07
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Ami Bera	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought	2014 Other (specify)
	Other (Specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	_
	Amount
City State Zip Code	
Purpose of Expenditure Category/	Office Sought: House State
Purpose of Expenditure Category/ Type	State:
	District:
Name of Federal Candidate Supported or Opposed by Expenditure:	
	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
(	
MA-III Adduses	M M / D D / Y Y Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure Category/	Office Sought: House State:
Type	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President District.
	Check One: Support Oppose
	Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	
ioi omoo oodgii	Other (specify)
( ) CURTOTAL of Books of Index and at Forestilland	
(a) SUBTOTAL of Itemized Independent Expenditures	218.75
(b) SUBTOTAL of Unitemized Independent Expenditures	····· <b>&gt;</b>
(c) TOTAL Independent Expenditures	▶ 95462.81
(carry total from last page forward to Line 7)	