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## FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1 (a) Name	e of Individual, Organization or Corporation		٦
PLANNE	D PARENTHOOD ADVOCATES OF W		
(b) Address (number and street) check if different than previously reported 10 E DOTY ST, SUITE 205			
(c) City, State and ZIP Code			2 550 11 115 11 11
MADISON		WI 53703	3. FEC Identification Number
Occupation and Name of Employer (for Individual Filers Only)			C C90008673
5.	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?  THROUGH  Of  THROUGH  Of  THROUGH  Of  TO  THROUGH  OF  THROUGH  THROUGH  OF  THROUGH  THR	2017	
	TOTAL CONTRIBUTIONS  TOTAL INDEPENDENT EXPENDITURES		.00
/.	. C E. INSEL ENSERY EAR ENSERONIES		.00
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 any political party committee or its agent.			
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE			DATE ctronically Filed]
Barnes, Mel, , ,		Barnes, Mel, , ,	07/27/2017
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.			