



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Planned Parenthood Action Fund Inc. PAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		100486.68
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	46768.44									
(c) Total Receipts (from Line 19) .....	2995.98	399073.75								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	49764.42	499560.43								
7. Total Disbursements (from Line 31) .....	-4.40	449791.61								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	49768.82	49768.82								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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**

Write or Type Committee Name  
Planned Parenthood Action Fund Inc. PAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	350.00	239571.77
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1330.00	152539.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1680.00	392110.77
(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) .....	1680.00	392110.77
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) .....	1160.60	4983.47
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	155.38	1979.51
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)) .....	2995.98	399073.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2995.98	399073.75

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	995.60	11106.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	995.60	11106.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-1000.00	431634.75
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	5050.00
(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	5050.00
29. Other Disbursements.....	0.00	2000.00
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))..	-4.40	449791.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-4.40	449791.61

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	1680.00	392110.77
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5050.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1680.00	387060.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	995.60	11106.86
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1160.60	4983.47
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-165.00	6123.39

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 14	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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 Action Fund Inc. PAC

A.

Full Name (Last, First, Middle Initial) Ms. Claire Sherwood		Date of Receipt																					
Mailing Address 88 Clifffield Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		1	1		2	0	0	8														
City	State	Zip Code																					
Bedford	NY	10506																					
FEC ID number of contributing federal political committee.		Transaction ID: A2008-2560126																					
C		Amount of Each Receipt this Period																					
		350.00																					
Name of Employer None	Occupation Housewife																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼																						
		350.00																					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	350.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 14

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 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: 2008  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Aggregate Year-to-Date ▼  
4752.63

Date of Receipt

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

Transaction ID: A7474

Amount of Each Receipt this Period

21.66

Reimbursement for Administrative Expenses

**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: 2008  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Aggregate Year-to-Date ▼  
4752.63

Date of Receipt

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

Transaction ID: A7472

Amount of Each Receipt this Period

168.43

Reimbursement for Administrative Expenses

**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: 2008  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Aggregate Year-to-Date ▼  
4752.63

Date of Receipt

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

Transaction ID: A7473

Amount of Each Receipt this Period

739.67

Reimbursement for Administrative Expenses

**SUBTOTAL** of Receipts This Page (optional) .....

929.76

**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 / 14  
(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: 2008  
 Primary  General  
 Other (specify) ▼  
 Not Applicable

Aggregate Year-to-Date ▼  
4766.88

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 0 8 / 2 0 0 8

**Transaction ID: A7476**

Amount of Each Receipt this Period  
14.25

Reimbursement for Administrative Expenses

**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: 2008  
 Primary  General  
 Other (specify) ▼  
 Not Applicable

Aggregate Year-to-Date ▼  
4961.81

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 1 6 / 2 0 0 8

**Transaction ID: A7477**

Amount of Each Receipt this Period  
194.93

Reimbursement for Administrative Expenses

**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: 2008  
 Primary  General  
 Other (specify) ▼  
 Not Applicable

Aggregate Year-to-Date ▼  
4983.47

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 2 6 / 2 0 0 8

**Transaction ID: A7478**

Amount of Each Receipt this Period  
21.66

Reimbursement for Administrative Expenses

**SUBTOTAL** of Receipts This Page (optional) ..... ► **230.84**

**TOTAL** This Period (last page this line number only) ..... ► **1160.60**

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

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

FOR LINE NUMBER: PAGE 9 / 14  
(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 New York State NY Zip Code 10286  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) Not Applicable  
Aggregate Year-to-Date 1888.02  
Date of Receipt 11 / 25 / 2008  
Transaction ID: A7480  
Amount of Each Receipt this Period 63.89  
Bank Interest

**B.** Full Name (Last, First, Middle Initial)  
Bank of New York  
Mailing Address One Wall Street  
City New York State NY Zip Code 10286  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) Not Applicable  
Aggregate Year-to-Date 1949.19  
Date of Receipt 11 / 30 / 2008  
Transaction ID: A7475  
Amount of Each Receipt this Period 61.17  
Bank Interest

**C.** Full Name (Last, First, Middle Initial)  
Bank of New York  
Mailing Address One Wall Street  
City New York State NY Zip Code 10286  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) Not Applicable  
Aggregate Year-to-Date 1979.51  
Date of Receipt 12 / 31 / 2008  
Transaction ID: A7479  
Amount of Each Receipt this Period 30.32  
Bank Interest

**SUBTOTAL** of Receipts This Page (optional) ..... ► 155.38  
**TOTAL** This Period (last page this line number only) ..... ► 155.38

**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

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NAME OF COMMITTEE (In Full)  
Planned Parenthood Action Fund Inc. PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) American Express Merchant Services</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Merchant Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p><b>Transaction ID:</b> B244683 <b>Date of Disbursement</b> 11 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 3.73</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) American Express Merchant Services</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Merchant Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p><b>Transaction ID:</b> B244686 <b>Date of Disbursement</b> 12 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 14.25</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) American Express Merchant Services</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Merchant Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p><b>Transaction ID:</b> B244690 <b>Date of Disbursement</b> 12 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 3.43</p> <p>001 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 21.41

**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

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NAME OF COMMITTEE (In Full)  
Planned Parenthood Action Fund Inc. PAC

A.	Full Name (Last, First, Middle Initial) Citicorp Payment Services Inc.	Transaction ID: B244682 Date of Disbursement 11 / 25 / 2008
	Mailing Address 14000 Citi Cards Way	Amount of Each Disbursement this Period 658.07
	City Jacksonville State FL Zip Code 32258	
	Purpose of Disbursement Merchant Fee Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) Citicorp Payment Services Inc.	Transaction ID: B244687 Date of Disbursement 12 / 04 / 2008
	Mailing Address 14000 Citi Cards Way	Amount of Each Disbursement this Period 117.06
	City Jacksonville State FL Zip Code 32258	
	Purpose of Disbursement Merchant Fee Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) First Data Merchant Services	Transaction ID: B244684 Date of Disbursement 11 / 25 / 2008
	Mailing Address P.O. Box 6600	Amount of Each Disbursement this Period 77.87
	City Hagerstown State MD Zip Code 21740	
	Purpose of Disbursement Equipment Lease Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>853.00</b>
<b>TOTAL</b> 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 12 / 14

<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

A.	Full Name (Last, First, Middle Initial) First Data Merchant Services	Transaction ID: B244685
	Mailing Address P.O. Box 6600	Date of Disbursement MM / DD / YYYY 11 / 25 / 2008
	City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period 21.66
	Purpose of Disbursement Merchant Fee Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) First Data Merchant Services	Transaction ID: B244688
	Mailing Address P.O. Box 6600	Date of Disbursement MM / DD / YYYY 12 / 10 / 2008
	City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period 77.87
	Purpose of Disbursement Equipment Lease Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) First Data Merchant Services	Transaction ID: B244689
	Mailing Address P.O. Box 6600	Date of Disbursement MM / DD / YYYY 12 / 17 / 2008
	City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period 21.66
	Purpose of Disbursement Merchant Fee Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>121.19</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>995.60</b>

**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 13 / 14

<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

A.

Full Name (Last, First, Middle Initial)  
Nancy Boyda for Congress

Mailing Address PO Box 1474

City State Zip Code  
Topeka KS 66601

Purpose of Disbursement  
Contribution

Candidate Name  
Nancy E Boyda

Office Sought:  House  
 Senate  
 President  
State: KS District: 02

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: B226110

Date of Disbursement

/

Amount of Each Disbursement this Period

Voided: Original check dated 08/14/2008

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

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

Form/Schedule: SA11AI

Transaction ID:

Please note that our committee follows all federal regulations, including those found at 11 CFR 104.7(a) governing the solicitation of contributors. This committee specifically requests all pertinent information from contributors, including employer and occupation; informs contributors that the committee is required by law to report the same; and, makes a follow-up request for omitted information when necessary. The committee thus complies with the best efforts rules.