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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For	Other Than An Autho	orized Committee		Office Use Only
NAME OF TYPE COMMITTEE (in full)	PE OR PRINT ▼	Example: If typing, to over the lines.	ype 12FE4M	5
Protecting Choice in Calif	fornia, a project of F	Planned Parentho	od Affiliates of C	alifornia
ADDRESS (number and street)	555 Capitol Mall, Suite 400			
Check if different				
than previously reported. (ACC)	Sacramento		L CA	95814
2. FEC IDENTIFICATION NUMBER	BER ▼ CITY		STATE ▲	ZIP CODE ▲
C C00556860	3. IS RE	THIS NEW (N)	OR AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:			20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:			20 (M6) Sep :	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)				20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Q3)	Report for the:	Convention (12C)	Special (1	128)
January 31 Year-End Report (YE)	Election		D / Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (3	0R) Special (30S)
Termination Report (TER)	Election	on May / D	D / Y = Y = Y	in the State of
5. Covering Period 11	29 2022	through	12 31	2022
I certify that I have examined this F	Report and to the best of n Ragsac, Nikki, , ,	ny knowledge and belie	f it is true, correct and	complete.
Type or Print Name of Treasurer				
Signature of Treasurer Ragsac, N	Vikki, , ,	[Electronically File	d Date	/ 26 / Y Y Y Y Y Y Y 2023
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109				
Office Use Only				FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Protecting Choice in California, a project of Planned Parenthood Affiliates of California

11 29 2022 12 31 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 126784.15 January 1. 2022 (b) Cash on Hand at 115863.62 Beginning of Reporting Period..... 0.00 152350.00 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 279134.15 115863.62 6(a) and 6(c) for Column B)..... 10050.00 173320.53 Total Disbursements (from Line 31)...... 7. Cash on Hand at Close of 8. Reporting Period 105813.62 105813.62 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 1324.24 Schedule C and/or Schedule D) 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. 05/2016)

Write or Type Committee Name

Protecting Choice in California, a project of Planned Parenthood Affiliates of California

2022 12 31 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 0.00 12600.00 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized (iii) TOTAL (add 12600.00 0.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 129250.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 141850.00 0.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 10500.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3)..... 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (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))....... 0.00 152350.00 20. Total Federal Receipts 0.00 152350.00 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Galerida Tear-to-bate
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	50.00	4243.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	50.00	4243.87
. Transfers to Affiliated/Other Party		
CommitteesContributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures	45 45 45	
(use Schedule E)Coordinated Party Expenditures	0.00	35076.66
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
,	4 4	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	4 4	
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	21000.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))	0.00	21000.00
Other Disbursements (Including		
Non-Federal Donations)	10000.00	113000.00
Federal Election Activity (52 U.S.C. § 30101(a) Allocated Federal Election Activity	20))	
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid	1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1
Entirely With Federal Funds	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
-		
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	12252.00	470000 50
20, 21, 20, 20, 21, 20(a), 28 and 00(b))	10050.00	173320.53
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	10050.00	
non Eno organization	10050.00	173320.53

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 0.00 141850.00 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 21000.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 0.00 120850.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 50.00 4243.87 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 50.00 4243.87 (subtract Line 37 from Line 36)

S П

SCHEDULE B (FEC Form 3X)			FOR LIN	FOR LINE NUMBER: PAGE 6 OF 7			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		(check c	nly one)	ne)		
		ummary Page			23 28c	26 27 x 29 30b	
Any information copied from such Reports and Statem	ents may no	nt he sold or us				~ 1	
or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)							
Protecting Choice in California, a pr	roject of	Planned Pa	arenthoo	d Affiliate	es of Ca	alifornia	
Full Name (Last, First, Middle Initial)							
A. Planned Parenthood Southeast Advocates, Inc.				Date o	f Disburse		
Mailing Address 241 Peachtree Street, NE, Suite 40				11	11 29 2022		
,		Zip Code		FEC Id	lentificatio	n Number	
Atlanta Purpose of Disbursement	GA	30303					
Civic Donation			012			ID ED4007	
Candidate Name			Category/			ID: EB1387 Disbursement this Period	
Type					10000.00		
	rsement For: Primary General General				7	10000.00	
	Other (specify) ▼			│	emo Item		
State: District:				Ц			
Full Name (Last, First, Middle Initial) B.				Date o	f Disburse	ement	
ь.				M = M	/ D		
Mailing Address				L	J L.		
City State Zip Code				EEC I	lontification	n Number	
					FEC Identification Number		
Purpose of Disbursement							
Candidate Name Category/				Amour	t of Each	Disbursement this Period	
Туре							
Office Sought: House Disbursem	nent For: Primary General					4 4	
	Other (specify)						
State: District:	IVIE	emo Item					
Full Name (Last, First, Middle Initial)				Data	f Disburse	ymont	
C.				M M			
Mailing Address					J'L.		
City	state	Zip Code		FFO Is	l = ± : £ : = ± : = .	n Niversia au	
		· 			iei iliiicatioi	n Number	
Purpose of Disbursement							
Candidate Name Category/				Amour	t of Fach	Disbursement this Period	
			Type				
Office Sought: House Disbursement For: Senate Primary General				-	7 7		
	Primary General Other (specify) ▼			П.			
State: District:					emo Item		
·						40000.00	
SUBTOTAL of Disbursements This Page (optional)			·····•	_ <u> </u>		10000.00	
TOTAL This Period (last page this line number only).				L.		10000.00	

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 7 OF 7
FOR LINE NUMBER:
(check only one) 9

x 10

NAME OF COMMITTEE (In Full) Protecting Choice in California, a projection	ect of Pla	nned Parenthood	Affiliates of California		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planned Parenthood Affiliates of California			Nature of Debt (Purpose): Staff Time/Support/Various		
Mailing Address 1201 K Street, Suite 710					
City Sacramento	State CA	Zip Code 95814			
Outstanding Balance Beginning This Period 490.97			Transaction ID : PD1360		
Amount Incurred This Period	Payment This Period		Outstanding Balance at Close of This Period		
0.00		0.00	490.97		
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planned Parenthood Affiliates of California			Nature of Debt (Purpose): Staff Time for Non-Federal Activity		
Mailing Address 1201 K Street, Suite 710					
City Sacramento	State CA	Zip Code 95814			
Outstanding Balance Beginning This Period 0.00			Transaction ID : PD1388		
Amount Incurred This Period 833.27	Pay	ment This Period	Outstanding Balance at Close of This Period 833.27		
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):		
Mailing Address					
City	State	Zip Code			
Outstanding Balance Beginning This Period					
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period		
SUBTOTALS This Period This Page (optional)			1324.24		
2) TOTALS This Period (last page this line number o			1324.24		
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			0.00		
4) ADD 2) and 3) and carry forward to appropriate lin	ne of Summa	ry Page (last page only) ▶	1324.24		