

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation Planned Parenthood Advocates Mar Monte			3. FEC Identification Number <div><div>C</div><div>C90007311</div></div>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1605 The Alameda			
(c) City, State and ZIP Code San Jose CA 95126			
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report ☐ 24-Hour Report
☐ October 15 Quarterly Report ☒ 48-Hour Report
☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on / /

5. COVERING PERIOD:

FROM / /

THROUGH / /

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES

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 _____

Liz Figueroa

Liz Figueroa

[Electronically Filed]

10/09/2014

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

SCHEDULE 5-A **ITEMIZED RECEIPTS**

PAGE 2 OF 7

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 FILER (In Full)

Planned Parenthood Advocates Mar Monte

A. Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project of Planned Parenthood Affiliates of California			Date of Receipt <div> <div>07</div> <div>19</div> <div>2014</div> </div>	
Mailing Address 555 Capitol Mall, Suite 1425			Transaction ID : NONC192	
City Sacramento	State CA	Zip Code 95814	Amount of Each Receipt this Period <div> <div></div> <div>62.50</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>				
Name of Employer			Occupation	

B. Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project of Planned Parenthood Affiliates of California			Date of Receipt <div> <div>07</div> <div>22</div> <div>2014</div> </div>	
Mailing Address 555 Capitol Mall, Suite 1425			Transaction ID : NONC191	
City Sacramento	State CA	Zip Code 95814	Amount of Each Receipt this Period <div> <div></div> <div>3.71</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>				
Name of Employer			Occupation	

C. Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project of Planned Parenthood Affiliates of California			Date of Receipt <div> <div>07</div> <div>22</div> <div>2014</div> </div>	
Mailing Address 555 Capitol Mall, Suite 1425			Transaction ID : NONC209	
City Sacramento	State CA	Zip Code 95814	Amount of Each Receipt this Period <div> <div></div> <div>62.50</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>				
Name of Employer			Occupation	

D. Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project of Planned Parenthood Affiliates of California			Date of Receipt <div> <div>08</div> <div>01</div> <div>2014</div> </div>	
Mailing Address 555 Capitol Mall, Suite 1425			Transaction ID : NONC193	
City Sacramento	State CA	Zip Code 95814	Amount of Each Receipt this Period <div> <div></div> <div>50.72</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>				
Name of Employer			Occupation	

SUBTOTAL of Receipts This Page (optional)

179.43

TOTAL This Period (last page carry total to Line 6)

SCHEDULE 5-A **ITEMIZED RECEIPTS**

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NAME OF FILER (In Full)

Planned Parenthood Advocates Mar Monte

A. Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project of Planned Parenthood Affiliates of California			Date of Receipt
Mailing Address 555 Capitol Mall, Suite 1425			MM / DD / YYYY 08 / 01 / 2014
City Sacramento	State CA	Zip Code 95814	Transaction ID : NONC194
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 312.50
Name of Employer		Occupation	

B. Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project of Planned Parenthood Affiliates of California			Date of Receipt
Mailing Address 555 Capitol Mall, Suite 1425			MM / DD / YYYY 09 / 01 / 2014
City Sacramento	State CA	Zip Code 95814	Transaction ID : NONC195
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 3750.00
Name of Employer		Occupation	

C. Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project of Planned Parenthood Affiliates of California			Date of Receipt
Mailing Address 555 Capitol Mall, Suite 1425			MM / DD / YYYY 09 / 01 / 2014
City Sacramento	State CA	Zip Code 95814	Transaction ID : NONC196
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 170.83
Name of Employer		Occupation	

D. Full Name (Last, First, Middle Initial) Protecting Choice in California, A Project of Planned Parenthood Affiliates of California			Date of Receipt
Mailing Address 555 Capitol Mall, Suite 1425			MM / DD / YYYY 10 / 01 / 2014
City Sacramento	State CA	Zip Code 95814	Transaction ID : NONC197
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2187.50
Name of Employer		Occupation	

SUBTOTAL of Receipts This Page (optional) ▶ 6420.83

TOTAL This Period (last page carry total to Line 6) ▶ 6600.26

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 7
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Planned Parenthood Advocates Mar Monte

Full Name (Last, First, Middle Initial) of Payee

James Wisley

Date of Public Distribution/Dissemination

MM / DD / YYYY
07 / 22 / 2014

Mailing Address 1570 Prospect Avenue

Amount

62.50

Transaction ID : EDTEALC264

Purpose of Expenditure
Consulting for Phone Banking; 7/22 - 7/30. Costs do not exceed \$10,000 until 10/9/14Category/
Type 001Office Sought: ☒ House State: CA
☐ Senate District: 07
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Ami BeraCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

10683.47

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Planned Parenthood Advocates Mar Monte

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 01 / 2014

Mailing Address 1605 The Alameda

Amount

80.00

Transaction ID : EDTEALC268

Purpose of Expenditure
Copies for Phone Banking; 9/1 - 10/9. Costs do not exceed \$10,000 until 10/9/14Category/
Type 001Office Sought: ☒ House State: CA
☐ Senate District: 07
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Ami BeraCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

10683.47

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Planned Parenthood Advocates Mar Monte

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 01 / 2014

Mailing Address 1605 The Alameda

Amount

1010.71

Transaction ID : EDTEALC269

Purpose of Expenditure
Food & Expenses for Phone Banking; 9/1 - 10/9. Costs do not exceed \$10,000 until 10/9/14Category/
Type 001Office Sought: ☒ House State: CA
☐ Senate District: 07
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Ami BeraCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

10683.47

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 1153.21

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 5 OF 7
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NAME OF FILER (In Full)

Planned Parenthood Advocates Mar Monte

Full Name (Last, First, Middle Initial) of Payee

Planned Parenthood Advocates Mar Monte

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 01 / 2014

Mailing Address 1605 The Alameda

Amount

2096.00

City State Zip Code
San Jose CA 95126

Transaction ID : EDTEALC270

Purpose of Expenditure
Staff Time for Phone Banking; 9/1 - 10/9. Costs do not exceed \$10,000 until 10/9/14Category/
Type 001Office Sought: ☒ House State: CA
☐ Senate District: 07
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Ami BeraCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 10683.47Disbursement For: ☐ Primary ☒ General
2014
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Planned Parenthood Affiliates of California

Date of Public Distribution/Dissemination

MM / DD / YYYY
07 / 01 / 2014

Mailing Address 555 Capitol Mall, Suite 510

Amount

3.71

City State Zip Code
Sacramento CA 95814

Transaction ID : EDTEALC263

Purpose of Expenditure
Staff Time; 7/22 - 7/31. Costs do not exceed \$10,000 until 10/9/14Category/
Type 001Office Sought: ☒ House State: CA
☐ Senate District: 07
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Ami BeraCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 10683.47Disbursement For: ☐ Primary ☒ General
2014
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Planned Parenthood Affiliates of California

Date of Public Distribution/Dissemination

MM / DD / YYYY
08 / 01 / 2014

Mailing Address 555 Capitol Mall, Suite 510

Amount

50.72

City State Zip Code
Sacramento CA 95814

Transaction ID : EDTEALC266

Purpose of Expenditure
Staff Time; 8/1 - 8/31. Costs do not exceed \$10,000 until 10/9/14Category/
Type 001Office Sought: ☒ House State: CA
☐ Senate District: 07
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Ami BeraCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 10683.47Disbursement For: ☐ Primary ☒ General
2014
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 2150.43

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 6 OF 7
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Planned Parenthood Advocates Mar Monte

Full Name (Last, First, Middle Initial) of Payee

Planned Parenthood Affiliates of California

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y
09 / 01 / 2014

Mailing Address 555 Capitol Mall, Suite 510

Amount

170.83

City State Zip Code
Sacramento CA 95814

Transaction ID : EDTEALC271

Purpose of Expenditure
Staff Time; 9/1 - 9/30. Costs do not exceed \$10,000 until
10/9/14Category/
Type 001Office Sought: ☒ House State: CA
☐ Senate District: 07
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Ami BeraCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 10683.47Disbursement For: ☐ Primary ☒ General
2014
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Political Data

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y
10 / 01 / 2014

Mailing Address P.O. Box 59570

Amount

2187.50

City State Zip Code
Norwalk CA 90652

Transaction ID : EDTEALC274

Purpose of Expenditure
Data for Phone Banking; 10/1 - 10/18. Costs do not exceed
\$10,000 until 10/9/14Category/
Type 003Office Sought: ☒ House State: CA
☐ Senate District: 07
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Ami BeraCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 10683.47Disbursement For: ☐ Primary ☒ General
2014
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Political Data, Inc.

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y
09 / 01 / 2014

Mailing Address 825 S. Victory Blvd.

Amount

3750.00

City State Zip Code
Burbank CA 91502

Transaction ID : EDTEALC272

Purpose of Expenditure
Data List for Phone Banking; 10/1 - 10/18. Costs do not exceed
\$10,000 until 10/9/14Category/
Type 003Office Sought: ☒ House State: CA
☐ Senate District: 07
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Ami BeraCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 10683.47Disbursement For: ☐ Primary ☒ General
2014
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 6108.33

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 7 OF 7
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Planned Parenthood Advocates Mar Monte

Full Name (Last, First, Middle Initial) of Payee
Progressive Contact Technologies, Inc.

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 01 / 2014

Mailing Address P.O. Box 59570

Amount

City State Zip Code
Norwalk CA 90652Amount
959.00

Transaction ID : EDTEALC273

Purpose of Expenditure
Phone Banking; 9/1 - 10/9. Costs do not exceed \$10,000 until 10/9/14Category/
Type 003Office Sought: ☒ House State: CA
☐ Senate District: 07
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Ami BeraCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 10683.47Disbursement For: ☐ Primary ☒ General
2014
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
Wagaman Strategies

Date of Public Distribution/Dissemination

MM / DD / YYYY
08 / 01 / 2014

Mailing Address 886 Metal Lane

Amount

City State Zip Code
West Sacramento CA 95691Amount
312.50

Transaction ID : EDTEALC267

Purpose of Expenditure
Consulting for Phone Banking; 8/1 - 8/31. Costs do not exceed \$10,000 until 10/9/14Category/
Type 001Office Sought: ☒ House State: CA
☐ Senate District: 07
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Ami BeraCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 10683.47Disbursement For: ☐ Primary ☒ General
2014
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 1271.50

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 10683.47
(carry total from last page forward to Line 7)