

111 King Street
Madison, WI 53703
608-256-7549
608-256-3004 fax



Fax

To: Federal Election Commission **From:** Nicole Safar

Fax: 202-219-0174 **Pages:** 3

Phone: **Date:** October 24, 2008

Re: 24 hr reporting Independent Expenditures **CC:**

Urgent For Review Please Comment Please Reply Please Recycle

Attached please find Planned Parenthood Advocates of Wisconsin Inc.'s 24 hr report re: independent expenditures made in the U.S. presidential race.

Planned Parenthood Advocates of Wisconsin, Inc. (PPAWI) is a Wisconsin registered 501(c)4 non-profit corporation. PPAWI is taking advantage of the United State's Supreme Court decision in *Federal Election Commission v. Massachusetts Citizens for Life, Inc. (MCFL)*, 479 U.S. 238 (1986). PPAWI has the following attributes that qualifies it as an MCFL Organization:

- (1) It was formed for the express purpose of promoting political ideas and does not engage in business activities;
- (2) It has no shareholders or other persons affiliated so as to have a claim on its assets or earnings;
- (3) It was not established by a business corporation or a labor union and does not accept contributions from such entities; and
- (4) None of the contributions received from individual were earmarked specifically for political use.

If you have any questions, please contact me at 608-256-7549 x2101.

Nicole Safar, JD
Legal and Policy Analyst
Planned Parenthood Advocates of Wisconsin
111 King Street, Suite 23
Madison, Wisconsin 53711
nicole.safar@ppwi.org

28039900644

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation Planned Parenthood Advocates of Wisconsin		3. FEC Identification Number C
(b) Address (number and street) check if different than previously reported 111 King St, suite #23		
(c) City, State and ZIP Code Madison, WI 53703		
2 Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

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

b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

10 16 2008
THROUGH
11 04 2008

6. TOTAL CONTRIBUTIONS

7. TOTAL INDEPENDENT EXPENDITURES

1,300.00

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. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Nicole Safar

10/24/08

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 5437g.

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

28039900645

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
Planned Parenthood Advocates of Wisconsin

Full Name (Last, First, Middle Initial) of Payee Gannett Wisconsin Newspapers	Date 10 24 2008
Mailing Address P.O. Box 59	Amount 1,300.00
City Appleton State WI Zip Code 54912	

Purpose of Expenditure online advertisement	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	

Calendar Year-To-Date Per Election for Office Sought 5,597.92	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
---	---

Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	

Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	

Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
--	---

Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	

Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	

Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
--	---

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1,300.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures..... (Carry total from last page forward to Line 7)	▶	1,300.00

28039900646

**Federal Election Commission
 ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
---	-----------------

<input type="checkbox"/> USPS First Class Mail	Postmarked
--	------------

<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
--	------------------

<input type="checkbox"/> USPS Priority Mail	Postmarked
	Delivery Confirmation™ Label <input type="checkbox"/>

<input type="checkbox"/> USPS Express Mail	Postmarked
--	------------

<input type="checkbox"/> Postmark Illegible	
---	--

<input type="checkbox"/> No Postmark	
--------------------------------------	--

<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
--	---------------

<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
--	-----------------

<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
---	-----------------

<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
--	-------------------------------

The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.

N/A
 PREPARER

N/A
 DATE PREPARED

28039900647