

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Planned Parenthood Votes

ADDRESS (number and street)

123 William St., 10th Floor

Check if different
than previously
reported. (ACC)

New York

NY

10038

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00489799

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☒ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

NY

5. Covering Period

M M / D D / Y Y Y Y Y Y
10 18 2018

through

M M / D D / Y Y Y Y Y Y
11 26 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hubbard, Tshombe, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
06 17 2019

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)

Page 2

Write or Type Committee Name

Planned Parenthood Votes

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 18 / 2018 To: M M / D D / Y Y Y Y Y Y
11 / 26 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2018		1134445.11
(b) Cash on Hand at Beginning of Reporting Period.....	7119995.12	
(c) Total Receipts (from Line 19)	2898776.89	17320656.69
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	10018772.01	18455101.80
7. Total Disbursements (from Line 31).....	6028120.76	14464450.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	3990651.25	3990651.25
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	127628.77	



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)

Page 3

Write or Type Committee Name

Planned Parenthood Votes

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		18		2018

To:

M M	/	D D	/	Y Y Y Y
11		26		2018

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 (i) Itemized (use Schedule A).....	1240500.00	14402733.70
(ii) Unitemized	410.00	16240.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1240910.00	14418973.70
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1652700.00	2871200.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2893610.00	17290173.70
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).....	3641.01	28957.11
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1525.88	1525.88
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 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))	2898776.89	17320656.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2898776.89	17320656.69

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	1050455.61	3721999.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1050455.61	3721999.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	869836.11	2175484.54
24. Independent Expenditures (use Schedule E)	3405654.60	4923364.24
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	2000.00
(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	2000.00
29. Other Disbursements (Including Non-Federal Donations).....	702174.44	3641601.99
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	6028120.76	14464450.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6028120.76	14464450.55

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	2893610.00	17290173.70
34. Total Contribution Refunds (from Line 28(d))	0.00	2000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2893610.00	17288173.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1050455.61	3721999.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	3641.01	28957.11
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1046814.60	3693042.67

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

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

FOR LINE NUMBER: PAGE 6 OF 283

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Adams, Walter, , ,

Mailing Address 836 Castle Falls Dr NE

City
AtlantaState
GAZip Code
30329-4114FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information RequestedOccupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 19 / 2018

Transaction ID : VV1NH9HR5Q3

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Baron, Margot, , ,

Mailing Address 8100 Connecticut Ave Apt 1405

City
Chevy ChaseState
MDZip Code
20815FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information RequestedOccupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 18 / 2018

Transaction ID : VV1NH9HR602

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Baskin Bronson, Edie, , ,

Mailing Address 1813 Silas Deane Hwy

City
Rocky HillState
CTZip Code
06067-1305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 25 / 2018

Transaction ID : VV1NH9HR5H6

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

2000.00

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 7 OF 283

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cadillac, Cassidy, , ,

Mailing Address 25 Silverleaf Ln

City

West Yarmouth

State

MA

Zip Code

02673-4781

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Information Requested

Occupation (for Individual)

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2018

Transaction ID : VV1NH9HR610

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chemla, Lori, , ,

Mailing Address 1270 Avenue Of The Americas

City

New York

State

NY

Zip Code

10020-1700

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Management

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 12 / 2018

Transaction ID : VV1NH9HR5V3

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Drexler, Katie, , ,

Mailing Address 354 McGuinness Blvd

Apt 3L

City

Brooklyn

State

NY

Zip Code

11222-1245

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Philanthropist

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2018

Transaction ID : VV1NH9HR5W1

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

8000.00

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 OF 283

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Drexler, Peggy, , ,

Mailing Address 640 Park Ave

City
New York

State
NY

Zip Code
10065-6126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2018

Transaction ID : VV1NH9HR5E2

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goldman Fowler, Amy, P, ,

Mailing Address 164 Mountain View Rd

City
Rhinebeck

State
NY

Zip Code
12572-2820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2018

Transaction ID : VV1NH9HR5D4

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hallum, Jennifer, , ,

Mailing Address 2408 E 7th St

City
Tucson

State
AZ

Zip Code
85719-5611

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Arizona Oncology

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2018

Transaction ID : VV1NH9HR5B8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

1016000.00

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 9 OF 283

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hermans, Katherine, , ,

Mailing Address 295 E Swedesford Rd
 # 137

City
 Wayne

State
 PA

Zip Code
 19087-1462

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 Information Requested

Occupation (for Individual)
 Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2018

Transaction ID : VV1NH9HR628

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Liebman, Ellen, , ,

Mailing Address 203 Vista Heights Rd

City

El Cerrito

State

CA

Zip Code

94530-6509

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 SEL

Occupation (for Individual)
 Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2018

Transaction ID : VV1NH9HR592

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mackinnon, Daniel, , ,

Mailing Address 4181 35th St

City

San Diego

State

CA

Zip Code

92104-2205

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 Self

Occupation (for Individual)
 Landlord/Property Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018

Transaction ID : VV1NH9HR585

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

1000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 283

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McAllister, Louise, , ,

Mailing Address 2721 1st Ave

City
SeattleState
WAZip Code
98121-1143FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information RequestedOccupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018

Transaction ID : VV1NH9HR569

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Petty, Larry, , ,

Mailing Address 715 Carolina Ave

City
GastoniaState
NCZip Code
28052-6131FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information RequestedOccupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2018

Transaction ID : VV1NH9HR5P5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PP Advocacy Project Los Angeles County

Mailing Address 555 Capitol Mall
Ste 510City
SacramentoState
CAZip Code
95814-4581FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018

Transaction ID : VV1NH9HR551

Amount of Each Receipt this Period

150000.00

☐ Memo Item

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

151500.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 283

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Prentiss, Carol, , ,

Mailing Address 343 Times Sq Rd

City

Industry

State

ME

Zip Code

04938-4566

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Homemaker

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2018

Transaction ID : VV1NH9HR5A0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rising, Dean, , ,

Mailing Address 2324 E Nottingham St

City

Springfield

State

MO

Zip Code

65804-7821

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information RequestedOccupation (for Individual)
Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : VV1NH9HR5Y6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodgers, Francene, S, ,

Mailing Address 100 Belvidere St
Apt 8G

City

Boston

State

MA

Zip Code

02199-7621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2018

Transaction ID : VV1NH9HR5G8

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

7000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 283

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schenck, Kimberly, , ,

Mailing Address 4622 38th St NW

City
Washington

State
DC

Zip Code
20016-1804

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2018

Transaction ID : VV1NH9HR5Z4

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sharp, Rodney, , ,

Mailing Address 7 Wood Rd

City
Wilmington

State
DE

Zip Code
19806-2021

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2018

Transaction ID : VV1NH9HR5N7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Shaw Ruddock, Jill, , ,

Mailing Address 34 Crackatuxet Cove Rd

City
Edgartown

State
MA

Zip Code
02539-7206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2018

Transaction ID : VV1NH9HR5S7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

2500.00

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 13 OF 283

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Siner, Elinor, , ,

Mailing Address 6 Channing St

City
Cambridge

State
MA

Zip Code
02138-4714

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

Transaction ID : VV1NH9HR5R9

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stattman, Dennis, , ,

Mailing Address 7 Merrick Dr

City
Newtown

State
PA

Zip Code
18940-2927

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2018

Transaction ID : VV1NH9HR5X8

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sussman, Jeffrey, , ,

Mailing Address 145 Central Park W
Apt 13B

City
New York

State
NY

Zip Code
10023-6296

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Property Group Partners

Occupation (for Individual)
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2018

Transaction ID : VV1NH9HR5M9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

51500.00

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:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wrightson, Barbara, C, ,

Mailing Address 73 Cross St

City
Andover

State
MA

Zip Code
01810-3227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2018

Transaction ID : VV1NH9HR577

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

1000.00

1240500.00

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. House Majority PAC

Mailing Address 700 13th St NW
Ste 600

City
Washington

State
DC

Zip Code
20005-5998

FEC ID number of contributing
federal political committee.

C C00495028

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935700.00

Date of Receipt

10 / **19** / **2018**

Transaction ID : VV1NH9HR501

Amount of Each Receipt this Period

1000.00

☐ Memo Item

In-Kind Received for Research Services

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. House Majority PAC

Mailing Address 700 13th St NW
Ste 600

City
Washington

State
DC

Zip Code
20005-5998

FEC ID number of contributing
federal political committee.

C C00495028

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935700.00

Date of Receipt

10 / **22** / **2018**

Transaction ID : VV1NH9HR527

Amount of Each Receipt this Period

750000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. House Majority PAC

Mailing Address 700 13th St NW
Ste 600

City
Washington

State
DC

Zip Code
20005-5998

FEC ID number of contributing
federal political committee.

C C00495028

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1935700.00

Date of Receipt

10 / **26** / **2018**

Transaction ID : VV1NH9HR535

Amount of Each Receipt this Period

734700.00

☐ Memo Item

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

1485700.00

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:
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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Win Justice

Mailing Address 1536 U St NW

City
Washington

State
DC

Zip Code
20009-3912

FEC ID number of contributing
federal political committee.

C C00672394

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935500.00

Date of Receipt

10 / **22** / **2018**

Transaction ID : VV1NH9HR519

Amount of Each Receipt this Period

167000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

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

167000.00

1652700.00

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'Brien Garrett

Mailing Address 1133 19th St NW
Ste 300

City
Washington

State
DC

Zip Code
20036-3610

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3641.01

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2018

Transaction ID : VV1NH9HR543

Amount of Each Receipt this Period

3641.01

☐ Memo Item

Refund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

3641.01

3641.01

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Planned Parenthood Action Kentucky

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : VV1NH9HR644

Amount of Each Receipt this Period

350.00

☐ Memo Item

Voter Guide

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Planned Parenthood Advocates of Indiana and Kentucky

Mailing Address 200 S Meridian St
Ste 400

City

Indianapolis

State

IN

Zip Code

46225-1076

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 26 / 2018

Transaction ID : VV1NH9HR636

Amount of Each Receipt this Period

350.00

☐ Memo Item

Voter Guide

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Planned Parenthood Empire State Acts

Mailing Address 194 Washington Ave

City

Albany

State

NY

Zip Code

12210-2326

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 14 / 2018

Transaction ID : VV1NH9HR652

Amount of Each Receipt this Period

350.00

☐ Memo Item

Voter Guide

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

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

1050.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 OF 283

(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 type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Planned Parenthood Texas Votes

Mailing Address 201 E Ben White Blvd
Bldg B

City
Austin

State
TX

Zip Code
78704-7301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2018

Transaction ID : VV1NH9HR660

Amount of Each Receipt this Period

386.00

☐ Memo Item

Voter Guide

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

386.00

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

1436.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Angle Mastagni Mathews Political Strategies LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	3			2	0	1	8		

Mailing Address 507 N Sylvania Ave

City
Fort WorthState
TXZip Code
76111-2317Purpose of Disbursement
Teleconferencing Services

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : VV0P99HAW8
Amount of Each Disbursement this Period

20400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. API Source

Date of Disbursement

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

Mailing Address 4471 Nicole Dr

City
LanhamState
MDZip Code
20706-4352Purpose of Disbursement
Non-Candidate Specific Swag

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : VV0P99HAM8
Amount of Each Disbursement this Period

1079.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. API Source

Date of Disbursement

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

Mailing Address 4471 Nicole Dr

City
LanhamState
MDZip Code
20706-4352Purpose of Disbursement
Non-Candidate Specific Swag

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : VV0P99HAXI
Amount of Each Disbursement this Period

381.62

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

21861.41

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. API Source

Mailing Address 4471 Nicole Dr

City
LanhamState
MDZip Code
20706-4352Purpose of Disbursement
Non-Candidate Specific Swag

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2018			

FEC Identification Number

C

Transaction ID : VV0P99HAW

Amount of Each Disbursement this Period

609.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address PO Box 27025

City
RichmondState
VAZip Code
23261-7025Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C

Transaction ID : VV0P99HAX8

Amount of Each Disbursement this Period

782.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Blackbaud Inc.

Mailing Address 2000 Daniel Island Dr

City
Daniel IslandState
SCZip Code
29492-7541Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

FEC Identification Number

C

Transaction ID : VV0P99HAKI

Amount of Each Disbursement this Period

1197.42

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2589.14

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Blackbaud Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2018

Mailing Address 2000 Daniel Island Dr

City
Daniel IslandState
SCZip Code
29492-7541Purpose of Disbursement
Merchant Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VV0P99HAKK

Amount of Each Disbursement this Period

303.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Blueprint Interactive

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2018

Mailing Address 2229 N Pollard St

City
ArlingtonState
VAZip Code
22207-3855Purpose of Disbursement
Digital Advertising, No Express Advocacy

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VV0P99HAWK

Amount of Each Disbursement this Period

150000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Boomset Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2018

Mailing Address 75 Maiden Ln
Ste 704City
New YorkState
NYZip Code
10038-4677Purpose of Disbursement
Travel Expenses

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VV0P99HAKI

Amount of Each Disbursement this Period

541.57

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

150844.76

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. BWR Public RelationsMailing Address 825 3rd Ave
FI 22City
New YorkState
NYZip Code
10022-7866Purpose of Disbursement
Communications Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAXF**

Amount of Each Disbursement this Period

1140.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Catalist LLCMailing Address 1090 Vermont Ave NW
Ste 300City
WashingtonState
DCZip Code
20005-4966Purpose of Disbursement
Database Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAWI**

Amount of Each Disbursement this Period

252.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Catalist LLCMailing Address 1090 Vermont Ave NW
Ste 300City
WashingtonState
DCZip Code
20005-4966Purpose of Disbursement
Database Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAXI**

Amount of Each Disbursement this Period

20401.20

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

21793.48

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Donofrio, Sarah, , ,

Mailing Address 1110 Vermont Ave NW

City
WashingtonState
DCZip Code
20005-3544Purpose of Disbursement
Reimbursement - Travel Expenses

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAW**

Amount of Each Disbursement this Period

1421.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Enterprise - Milwaukee International Airport

Mailing Address 5300 S Howell Ave

City
MilwaukeeState
WIZip Code
53207-6156Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C**Transaction ID : VV0P99HBDC**

Amount of Each Disbursement this Period

824.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Evans & Katz, LLC

Mailing Address PO Box 75357

City
WashingtonState
DCZip Code
20013-0357Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

FEC Identification Number

C**Transaction ID : VV0P99HB04**

Amount of Each Disbursement this Period

9599.23

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

11020.86

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Hustle, Inc.Mailing Address 251 Kearny St
Ste 300City
San FranciscoState
CAZip Code
94108-4547Purpose of Disbursement
Software Licensing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		23		2018

FEC Identification Number

C**Transaction ID : VV0P99HAM3**

Amount of Each Disbursement this Period

4620.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hustle, Inc.Mailing Address 251 Kearny St
Ste 300City
San FranciscoState
CAZip Code
94108-4547Purpose of Disbursement
Software Licensing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		23		2018

FEC Identification Number

C**Transaction ID : VV0P99HAM4**

Amount of Each Disbursement this Period

3289.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hustle, Inc.Mailing Address 251 Kearny St
Ste 300City
San FranciscoState
CAZip Code
94108-4547Purpose of Disbursement
Software Licensing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		20		2018

FEC Identification Number

C**Transaction ID : VV0P99HAW**

Amount of Each Disbursement this Period

6266.38

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

14176.13

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Lincoln LoopMailing Address 4845 Pearl East Cir
Ste 118City
BoulderState
COZip Code
80301-6112Purpose of Disbursement
Digital Advertising, No Express Advocacy

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
10		25		2018

FEC Identification Number

C**Transaction ID : VV0P99HAM**

Amount of Each Disbursement this Period

21250.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lockwood Strategy Inc.

Mailing Address 1342 Florida Ave NW

City
WashingtonState
DCZip Code
20009-4808Purpose of Disbursement
Digital Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		06		2018

FEC Identification Number

C**Transaction ID : VV0P99HAX1**

Amount of Each Disbursement this Period

1685.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lockwood Strategy Inc.

Mailing Address 1342 Florida Ave NW

City
WashingtonState
DCZip Code
20009-4808Purpose of Disbursement
Digital Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		08		2018

FEC Identification Number

C**Transaction ID : VV0P99HAW**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

32935.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. M+R Strategic ServicesMailing Address 1901 L St NW
Ste 800City
WashingtonState
DCZip Code
20036-3510Purpose of Disbursement
Digital Advertising, No Express Advocacy

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : VV0P99HAM**

Amount of Each Disbursement this Period

45391.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. M+R Strategic ServicesMailing Address 1901 L St NW
Ste 800City
WashingtonState
DCZip Code
20036-3510Purpose of Disbursement
Digital Advertising, No Express Advocacy

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	8		

FEC Identification Number

C**Transaction ID : VV0P99HAW**

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. M+R Strategic ServicesMailing Address 1901 L St NW
Ste 800City
WashingtonState
DCZip Code
20036-3510Purpose of Disbursement
Digital Advertising, No Express Advocacy

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	1	8		

FEC Identification Number

C**Transaction ID : VV0P99HAW**

Amount of Each Disbursement this Period

50000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

195391.34

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Midtown Personnel Inc.

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		25		2018

Mailing Address 1130 Connecticut Ave NW
Ste 1101City
WashingtonState
DCZip Code
20036-3927Purpose of Disbursement
Temporary Data and Clerical Workers

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HAWI**

Amount of Each Disbursement this Period

8159.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Midtown Personnel Inc.

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		01		2018

Mailing Address 1130 Connecticut Ave NW
Ste 1101City
WashingtonState
DCZip Code
20036-3927Purpose of Disbursement
Temporary Data and Clerical Workers

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HAXB**

Amount of Each Disbursement this Period

4256.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Midtown Personnel Inc.

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		01		2018

Mailing Address 1130 Connecticut Ave NW
Ste 1101City
WashingtonState
DCZip Code
20036-3927Purpose of Disbursement
Temporary Data and Clerical Workers

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HAXI**

Amount of Each Disbursement this Period

1644.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

14060.80

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 PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Midtown Personnel Inc.

Date of Disbursement

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

Mailing Address 1130 Connecticut Ave NW
Ste 1101City
WashingtonState
DCZip Code
20036-3927Purpose of Disbursement
Temporary Data and Clerical Workers

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : VV0P99HAXI

Amount of Each Disbursement this Period

185.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Midtown Personnel Inc.

Date of Disbursement

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

Mailing Address 1130 Connecticut Ave NW
Ste 1101City
WashingtonState
DCZip Code
20036-3927Purpose of Disbursement
Temporary Data and Clerical Workers

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : VV0P99HAWI

Amount of Each Disbursement this Period

8689.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Midtown Personnel Inc.

Date of Disbursement

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

Mailing Address 1130 Connecticut Ave NW
Ste 1101City
WashingtonState
DCZip Code
20036-3927Purpose of Disbursement
Temporary Data and Clerical Workers

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : VV0P99HAWI

Amount of Each Disbursement this Period

4786.06

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

13661.03

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 PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. NGP VAN

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2018

Mailing Address 1101 15th St NW
Ste 500City
WashingtonState
DCZip Code
20005-5006Purpose of Disbursement
Database Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HAX2**

Amount of Each Disbursement this Period

159.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NReal Media Strategies

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2018

Mailing Address 4012 Linniki St

City
North Las VegasState
NVZip Code
89032-2665Purpose of Disbursement
Communications Consulting

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HAW/**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. O'Brien Garrett

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2018

Mailing Address 1133 19th St NW
Ste 300City
WashingtonState
DCZip Code
20036-3610Purpose of Disbursement
Fundraising Direct Mail Piece Production, Printing and Postage, No Express
Advocacy

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HAZ2**

Amount of Each Disbursement this Period

49246.88

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

59405.88

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 PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. PF Data LLC

Mailing Address PO Box 237

City
Mc FarlandState
WIZip Code
53558-0237Purpose of Disbursement
Database Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

FEC Identification Number

C

Transaction ID : VV0P99HAW

Amount of Each Disbursement this Period

14250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Federal IE, See Schedule E

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2018			

FEC Identification Number

C

Transaction ID : VV0P99HA3F

Amount of Each Disbursement this Period

- 7337.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Federal In-Kind, See Line 23

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2018			

FEC Identification Number

C

Transaction ID : VV0P99HAX

Amount of Each Disbursement this Period

- 1304.11

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5608.29

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		20		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal In-Kind, See Line 29

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HAXV**

Amount of Each Disbursement this Period

- 1304.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		20		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Federal In-Kind, See Line 23

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HAXX**

Amount of Each Disbursement this Period

- 8430.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		22		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal In-Kind, See Line 29

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HAX;**

Amount of Each Disbursement this Period

- 4512.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

- 14246.11

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
10		23		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal Digital Advertising, See Line 29

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VV0P99HAY2

Amount of Each Disbursement this Period

- 323.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
10		24		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal In-Kind, See Line 29

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VV0P99HAY4

Amount of Each Disbursement this Period

- 11406.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
10		24		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal In-Kind, See Line 29

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VV0P99HAYt

Amount of Each Disbursement this Period

- 10134.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

- 21863.10

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal In-Kind, See Line 29

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			24			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAY8**

Amount of Each Disbursement this Period

- 13206.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Federal IE, See Schedule E

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAEV**

Amount of Each Disbursement this Period

- 555.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal Staff Time, See Line 29

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAY/**

Amount of Each Disbursement this Period

- 1632.09

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

- 15393.09

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Federal In-Kind, See Line 23

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : VV0P99HAYC

Amount of Each Disbursement this Period

- 3701.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal Digital Advertising Production,
See Line 29

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : VV0P99HAYE

Amount of Each Disbursement this Period

- 328.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal Staff Time, See Line 29

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : VV0P99HAYI

Amount of Each Disbursement this Period

- 79.45

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 4108.45

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Federal IE, See Schedule E

004

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

FEC Identification Number

C Transaction ID : VV0P99HAY1

Amount of Each Disbursement this Period

- 536.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal In-Kind, See Line 29Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

FEC Identification Number

C Transaction ID : VV0P99HAYJ

Amount of Each Disbursement this Period

- 18265.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Federal In-Kind, See Line 23Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

FEC Identification Number

C Transaction ID : VV0P99HAYI

Amount of Each Disbursement this Period

- 7286.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

- 26087.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Federal In-Kind, See Line 23

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

FEC Identification Number

C **Transaction ID : VV0P99HAYF**

Amount of Each Disbursement this Period

 - 23302.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal Staff Time, See Line 29

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

FEC Identification Number

C **Transaction ID : VV0P99HAYR**

Amount of Each Disbursement this Period

 - 41491.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Federal In-Kind, See Line 23

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

FEC Identification Number

C **Transaction ID : VV0P99HAYI**

Amount of Each Disbursement this Period

 - 7388.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► - 72181.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 283

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		01		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal In-Kind, See Line 29

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : VV0P99HAYY

Amount of Each Disbursement this Period

- 7388.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		02		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Federal In-Kind, See Line 23

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : VV0P99HAYY

Amount of Each Disbursement this Period

- 5219.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		02		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal In-Kind, See Line 29

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : VV0P99HAZI

Amount of Each Disbursement this Period

- 16050.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 28657.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal Digital Advertising and
Production. See Line 29
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAZ2**

Amount of Each Disbursement this Period

- 532.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Advance Payment for Overhead and Travel Expenses
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAX3**

Amount of Each Disbursement this Period

600000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
List Rental
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAW**

Amount of Each Disbursement this Period

1196.16

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

600663.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2018			

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for Non-Federal In-Kind, See Line 29

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HB0A**

Amount of Each Disbursement this Period

- 2297.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2018			

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Draw Down Against Advance for List Rental, No Express Advocacy

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HB0B**

Amount of Each Disbursement this Period

- 40189.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2018			

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
List Rental, No Express Advocacy

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HB0C**

Amount of Each Disbursement this Period

40189.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

- 2297.28

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Premier Event Technology

Mailing Address 2871 Research Dr

City
Rochester HillsState
MIZip Code
48309-3577Purpose of Disbursement
Photography and Video Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAX0**

Amount of Each Disbursement this Period

85943.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Premier Event Technology

Mailing Address 2871 Research Dr

City
Rochester HillsState
MIZip Code
48309-3577Purpose of Disbursement
Photography and Video Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAWF**

Amount of Each Disbursement this Period

17425.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Premier Global ServicesMailing Address 3280 Peachtree Rd NE
Ste 1000City
AtlantaState
GAZip Code
30305-2451Purpose of Disbursement
Teleconferencing Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAZ4**

Amount of Each Disbursement this Period

1805.67

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

105175.07

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. The Atlas ProjectMailing Address 2010 Massachusetts Ave NW
Ste 200City
WashingtonState
DCZip Code
20036-1023Purpose of Disbursement
Database Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAX7**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Pivot GroupMailing Address 1015 15th St NW
Ste 600City
WashingtonState
DCZip Code
20005-2605Purpose of Disbursement
Research Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAWC**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Vector Media GroupMailing Address 18 W 21st St
Fl 8City
New YorkState
NYZip Code
10010-6940Purpose of Disbursement
Digital Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAZI**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Volume Services America, IncMailing Address 1 Independence Pt
Ste 305City
GreenvilleState
SCZip Code
29615-4540Purpose of Disbursement
Event Production Expenses

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2018

FEC Identification Number

C**Transaction ID : VV0P99HAM**

Amount of Each Disbursement this Period

44006.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Waterfront StrategiesMailing Address 3050 K St NW
Ste 100City
WashingtonState
DCZip Code
20007-5161Purpose of Disbursement
Digital Advertising Production and Buy, See Schedule E

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2018

FEC Identification Number

C**Transaction ID : VV0P99HAD3**

Amount of Each Disbursement this Period

- 66022.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
-------	---	-------	---	-----------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

- 22016.40

1050336.69

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses

Candidate Name

Nevada Advocates for Planned Parenthood Affiliates PAC (NAPPA PAC)

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C C00685289**Transaction ID : VV0P99HAXS**

Amount of Each Disbursement this Period

1304.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses

Candidate Name

Planned Parenthood Pennsylvania VotesCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C C00680637**Transaction ID : VV0P99HAXY**

Amount of Each Disbursement this Period

8430.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses for Non-Federal Committee

Candidate Name

Planned Parenthood Votes New Mexico IEPACCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	8		

FEC Identification Number

C**Transaction ID : VV0P99HAYI**

Amount of Each Disbursement this Period

13206.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

22940.11

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		29		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses

Candidate Name

Planned Parenthood of Minnesota Political Action FundCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C C00684530**Transaction ID : VV0P99HAYC**

Amount of Each Disbursement this Period

3701.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		01		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses

Candidate Name

Planned Parenthood Pennsylvania VotesCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C C00680637**Transaction ID : VV0P99HAYN**

Amount of Each Disbursement this Period

7286.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		01		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses

Candidate Name

MI PLANNED PARENTHOOD VOTESCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C C00568931**Transaction ID : VV0P99HAYI**

Amount of Each Disbursement this Period

23302.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

34289.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 283

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel ExpensesCandidate Name
Nevada Advocates for Planned Parenthood Affiliates PAC (NAPPA PAC)Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C C00685289**Transaction ID : VV0P99HAYX**

Amount of Each Disbursement this Period

7388.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel ExpensesCandidate Name
Planned Parenthood of Minnesota Political Action FundCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C C00684530**Transaction ID : VV0P99HAYZ**

Amount of Each Disbursement this Period

5219.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood of Minnesota Political Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2018

Mailing Address 671 Vandalia St

City
Saint PaulState
MNZip Code
55114-1312Purpose of Disbursement
ContributionCandidate Name
Planned Parenthood of Minnesota Political Action FundCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C C00684530**Transaction ID : VV0P99HAM**

Amount of Each Disbursement this Period

450000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

462607.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood of Orange and San Bernardino Counties' Community Action Fund PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2018

Mailing Address 700 S Tustin St

City
OrangeState
CAZip Code
92866-3425Purpose of Disbursement
Contribution

Candidate Name

Planned Parenthood of Orange and San Bernardino Counties' Community Action Fund PAC

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C C00687848**Transaction ID : VV0P99HAM2**

Amount of Each Disbursement this Period

250000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Women Vote!

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2018

Mailing Address 1800 M St NW
Ste 375NCity
WashingtonState
DCZip Code
20036-5862Purpose of Disbursement
Contribution

Candidate Name

Women Vote!Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C C00473918**Transaction ID : VV0P99HAW1**

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

350000.00

869836.11

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 283

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Chong + KosterMailing Address 1640 Rhode Island Ave NW
Ste 600City
WashingtonState
DCZip Code
20036-3229Purpose of Disbursement
Non-Federal Digital Advertising Production and Buy

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAM**

Amount of Each Disbursement this Period

30000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chong + KosterMailing Address 1640 Rhode Island Ave NW
Ste 600City
WashingtonState
DCZip Code
20036-3229Purpose of Disbursement
Non-Federal Digital Advertising Buy

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAW**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chong + KosterMailing Address 1640 Rhode Island Ave NW
Ste 600City
WashingtonState
DCZip Code
20036-3229Purpose of Disbursement
Non-Federal Digital Advertising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAW**

Amount of Each Disbursement this Period

64755.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

109755.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Community Outreach Group LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2018

Mailing Address 1110 Vermont Ave NW
Ste 300City
WashingtonState
DCZip Code
20005-6300Purpose of Disbursement
Non-Federal Canvassing

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : VV0P99HAW!**

Amount of Each Disbursement this Period

92230.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Farmworker Educational Radio Network, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2018

Mailing Address PO Box 62

City
KeeneState
CAZip Code
93531-0062Purpose of Disbursement
Non-Federal Radio Advertising Buy

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : VV0P99HAXN**

Amount of Each Disbursement this Period

3446.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Florida Planned Parenthood PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2018

Mailing Address 736 Central Ave

City
SarasotaState
FLZip Code
34236-4042Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : VV0P99HAW**

Amount of Each Disbursement this Period

8000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

103676.90

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 PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 283

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. M+R Strategic ServicesMailing Address 1901 L St NW
Ste 800City
WashingtonState
DCZip Code
20036-3510Purpose of Disbursement
Non-Federal Digital Advertising Production and Buy

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : VV0P99HAWI**

Amount of Each Disbursement this Period

5031.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NARAL Pro-Choice AmericaMailing Address 1156 15th St NW
Ste 700City
WashingtonState
DCZip Code
20005-1727Purpose of Disbursement
Donation

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : VV0P99HAKV**

Amount of Each Disbursement this Period

68500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NARAL Pro-Choice AmericaMailing Address 1156 15th St NW
Ste 700City
WashingtonState
DCZip Code
20005-1727Purpose of Disbursement
Donation

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : VV0P99HAX4**

Amount of Each Disbursement this Period

30000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

103531.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. NextGen Climate Action Committee

Mailing Address 211 North Lois Avenue

City
TampaState
FLZip Code
33609Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2018

FEC Identification Number

C **Transaction ID : VV0P99HAW**

Amount of Each Disbursement this Period

 4050.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund of GeorgiaMailing Address 75 Piedmont Ave NE
Ste 800City
AtlantaState
GAZip Code
30303-2507Purpose of Disbursement
Non-Federal Staff Time

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2018

FEC Identification Number

C **Transaction ID : VV0P99HAM7**

Amount of Each Disbursement this Period

 4783.10☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action FundMailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses for Non-Federal Committee

Candidate Name

Nevada Advocates for Planned Parenthood AffiliatesOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2018

FEC Identification Number

C **Transaction ID : VV0P99HAX1**

Amount of Each Disbursement this Period

 1304.11☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 10137.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 283

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses for Non-Federal Committee

Candidate Name

Planned Parenthood Votes OhioOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

FEC Identification Number

C**Transaction ID : VV0P99HAY0**

Amount of Each Disbursement this Period

4512.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Non-Federal Digital Advertising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

FEC Identification Number

C**Transaction ID : VV0P99HAY3**

Amount of Each Disbursement this Period

323.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses for Non-Federal Committee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

FEC Identification Number

C**Transaction ID : VV0P99HAY!**

Amount of Each Disbursement this Period

11406.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

16241.10

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 PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 283

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses for Non-Federal Committee

Candidate Name

Planned Parenthood Advocates of WisconsinOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

FEC Identification Number

C**Transaction ID : VV0P99HAY7**

Amount of Each Disbursement this Period

10134.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Non-Federal Staff Time

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

FEC Identification Number

C**Transaction ID : VV0P99HAYB**

Amount of Each Disbursement this Period

1632.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Non-Federal Digital Advertising Production

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

FEC Identification Number

C**Transaction ID : VV0P99HAYI**

Amount of Each Disbursement this Period

328.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

12094.09

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		31		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Non-Federal Staff Time

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : VV0P99HAYI**

Amount of Each Disbursement this Period

79.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		01		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses for Non-Federal Committee

Candidate Name

Planned Parenthood Votes OhioCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : VV0P99HAYK**

Amount of Each Disbursement this Period

18265.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		01		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Non-Federal Staff Time

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : VV0P99HAYI**

Amount of Each Disbursement this Period

41491.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

59835.45

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 283

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		01		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses for Non-Federal Committee

Candidate Name

Nevada Advocates for Planned Parenthood AffiliatesCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HAYV**

Amount of Each Disbursement this Period

7388.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		02		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses for Non-Federal Committee

Candidate Name

Planned Parenthood Votes OhioCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HAZ1**

Amount of Each Disbursement this Period

16050.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		02		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
Non-Federal Digital Advertising and Production

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VV0P99HAZ2**

Amount of Each Disbursement this Period

532.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

23970.50

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 PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		14		2018

Mailing Address 123 William St
FI 10City
New YorkState
NYZip Code
10038-3844Purpose of Disbursement
In-Kind Staff Time and Travel Expenses for Non-Federal Committee

Candidate Name

Democratic Executive Committee of FloridaOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

FEC Identification Number

C**Transaction ID : VV0P99HB0E**

Amount of Each Disbursement this Period

2297.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Great Plains Votes PAC

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		05		2018

Mailing Address 4401 W 109th St
Ste 200City
LeawoodState
KSZip Code
66211-1303Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

FEC Identification Number

C**Transaction ID : VV0P99HAX6**

Amount of Each Disbursement this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood New Hampshire Action Fund

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		18		2018

Mailing Address 18 Low Ave

City
ConcordState
NHZip Code
03301-4902Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

FEC Identification Number

C**Transaction ID : VV0P99HAK:**

Amount of Each Disbursement this Period

50000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

72297.28

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 283

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Pennsylvania Votes

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
10		25		2018

Mailing Address 1514 N 2nd St

City
HarrisburgState
PAZip Code
17102-2505Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : VV0P99HAM

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Votes Ohio

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		05		2018

Mailing Address 206 E State St

City
ColumbusState
OHZip Code
43215-4388Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : VV0P99HAX5

Amount of Each Disbursement this Period

30000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Resonance Campaigns

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
10		18		2018

Mailing Address 1020 16th St NW
Ste 701City
WashingtonState
DCZip Code
20036-5730Purpose of Disbursement
Non-Federal Mail Piece Production, Printing and Postage

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : VV0P99HAK1

Amount of Each Disbursement this Period

38522.96

☐ Memo Item

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

78522.96

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 PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 283

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Votes

Full Name (Last, First, Middle Initial)

A. Resonance CampaignsMailing Address 1020 16th St NW
Ste 701City
WashingtonState
DCZip Code
20036-5730Purpose of Disbursement
Non-Federal Canvassing Literature

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VV0P99HAM/

Amount of Each Disbursement this Period

3230.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Resonance CampaignsMailing Address 1020 16th St NW
Ste 701City
WashingtonState
DCZip Code
20036-5730Purpose of Disbursement
Non-Federal Mail Piece Production, Printing and Postage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : VV0P99HAW/

Amount of Each Disbursement this Period

60320.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Resonance CampaignsMailing Address 1020 16th St NW
Ste 701City
WashingtonState
DCZip Code
20036-5730Purpose of Disbursement
Non-Federal Mail Piece Production, Printing and Postage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : VV0P99HAW/

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

65550.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 283

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Votes

Full Name (Last, First, Middle Initial)

A. Resonance CampaignsMailing Address 1020 16th St NW
Ste 701City
WashingtonState
DCZip Code
20036-5730Purpose of Disbursement
Non-Federal Mail Piece Production, Printing and Postage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAZ5**

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Pivot GroupMailing Address 1015 15th St NW
Ste 600City
WashingtonState
DCZip Code
20005-2605Purpose of Disbursement
Non-Federal Mail Piece Production, Printing and Postage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

FEC Identification Number

C**Transaction ID : VV0P99HB00**

Amount of Each Disbursement this Period

4540.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Pivot GroupMailing Address 1015 15th St NW
Ste 600City
WashingtonState
DCZip Code
20005-2605Purpose of Disbursement
Non-Federal Mail Piece Production, Printing and Postage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

FEC Identification Number

C**Transaction ID : VV0P99HAX5**

Amount of Each Disbursement this Period

34022.29

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

46562.29

702174.44

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 60 OF 283

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Alamy

Nature of Debt (Purpose):
Photo LicensingMailing Address 20 Jay St
Ste 848City
BrooklynState
NYZip Code
11201-8306

Outstanding Balance Beginning This Period

0.00

Transaction ID : VTYQS9H5NN2

Amount Incurred This Period

30.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

30.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Associated Press

Nature of Debt (Purpose):
Digital Advertising, Debt Amount Adjusted to
Reflect Actual Cost

Mailing Address 200 Liberty St

City
New YorkState
NYZip Code
10281-1003

Outstanding Balance Beginning This Period

250.00

Transaction ID : VTYQS9H5N97

Amount Incurred This Period

0.00

Payment This Period

250.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Berg, Miriam, , ,

Nature of Debt (Purpose):
Digital Advertising Production

Mailing Address 2530 Q St NW

City
WashingtonState
DCZip Code
20007-4308

Outstanding Balance Beginning This Period

2125.00

Transaction ID : VTYQS9H5NG2

Amount Incurred This Period

1700.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3825.00

1) SUBTOTALS This Period This Page (optional)..... ►

3855.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 61 OF 283

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Chong + Koster

Nature of Debt (Purpose):
Digital Advertising BuyMailing Address 1640 Rhode Island Ave NW
Ste 600City
WashingtonState
DCZip Code
20036-3229

Outstanding Balance Beginning This Period

0.00

Transaction ID : VTYQS9H5NP0

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Outreach Group LLC

Nature of Debt (Purpose):
Canvassing, See Schedule E, Debt Amount
Adjusted to Reflect Actual AmountMailing Address 1110 Vermont Ave NW
Ste 300City
WashingtonState
DCZip Code
20005-6300

Outstanding Balance Beginning This Period

92230.43

Transaction ID : VTYQS9H5MP7

Amount Incurred This Period

15740.00

Payment This Period

92230.43

Outstanding Balance at Close of This Period

15740.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Outreach Group LLC

Nature of Debt (Purpose):
Non-Federal CanvassingMailing Address 1110 Vermont Ave NW
Ste 300City
WashingtonState
DCZip Code
20005-6300

Outstanding Balance Beginning This Period

92230.45

Transaction ID : VTYQS9H5ND8

Amount Incurred This Period

0.00

Payment This Period

92230.45

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

20740.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 62 OF 283

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Facebook

Nature of Debt (Purpose):
Digital Advertising

Mailing Address 1601 Willow Rd

City
Menlo ParkState
CAZip Code
94025-1452

Outstanding Balance Beginning This Period

0.00

Transaction ID : VTYQS9H5NQ7

Amount Incurred This Period

5125.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5125.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Garcimonde-Fisher, Lauren, , ,

Nature of Debt (Purpose):
Digital Advertising Production, Mail Piece
ProductionMailing Address 1750 30th St
217City
BoulderState
COZip Code
80301-1029

Outstanding Balance Beginning This Period

925.00

Transaction ID : VTYQS9H5NF4

Amount Incurred This Period

5239.57

Payment This Period

0.00

Outstanding Balance at Close of This Period

6164.57

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lincoln Loop

Nature of Debt (Purpose):
Digital Advertising ProductionMailing Address 4845 Pearl East Cir
Ste 118City
BoulderState
COZip Code
80301-6112

Outstanding Balance Beginning This Period

8749.84

Transaction ID : VTYQS9H5NH0

Amount Incurred This Period

0.00

Payment This Period

8749.84

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

11289.57

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 63 OF 283

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

M+R Strategic Services

Nature of Debt (Purpose):

Digital Advertising Production and Buy

Mailing Address 1901 L St NW
Ste 800City
WashingtonState
DCZip Code
20036-3510

Outstanding Balance Beginning This Period

15300.00

Transaction ID : VTYQS9H5NJ8

Amount Incurred This Period

0.00

Payment This Period

15300.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

O'Brien Garrett

Nature of Debt (Purpose):

Mail Piece Production, Printing and Postage,
Debt Amount Adjusted to Reflect Actual CostMailing Address 1133 19th St NW
Ste 300City
WashingtonState
DCZip Code
20036-3610

Outstanding Balance Beginning This Period

4571.50

Transaction ID : VTYQS9H5NA5

Amount Incurred This Period

0.00

Payment This Period

4571.50

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Stones' Phones

Nature of Debt (Purpose):

Voter Outreach Calls

Mailing Address 41750 Rancho Las Palmas Dr
ECity
Rancho MirageState
CAZip Code
92270-5511

Outstanding Balance Beginning This Period

0.00

Transaction ID : VTYQS9H5NR5

Amount Incurred This Period

6663.21

Payment This Period

0.00

Outstanding Balance at Close of This Period

6663.21

1) **SUBTOTALS** This Period This Page (optional)..... ►

6663.21

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 64 OF 283

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Terris, Barnes & Walters

Nature of Debt (Purpose):

Canvass Lit. See Schedule E

Mailing Address 400 Montgomery St
Ste 700City
San FranciscoState
CAZip Code
94104-1219

Outstanding Balance Beginning This Period

21210.40

Transaction ID : VTYQS9H5MN9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21210.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Terris, Barnes & Walters

Nature of Debt (Purpose):

Direct Mail Production, Printing and Postage,
Debt Amount Adjusted to Reflect Actual CostMailing Address 400 Montgomery St
Ste 700City
San FranciscoState
CAZip Code
94104-1219

Outstanding Balance Beginning This Period

26850.92

Transaction ID : VTYQS9H5NM4

Amount Incurred This Period

0.00

Payment This Period

26850.92

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Pivot Group

Nature of Debt (Purpose):

Canvassing Literature

Mailing Address 1015 15th St NW
Ste 600City
WashingtonState
DCZip Code
20005-2605

Outstanding Balance Beginning This Period

4020.00

Transaction ID : VTYQS9H5NK6

Amount Incurred This Period

0.00

Payment This Period

4020.00

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

21210.40

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 65 OF 283

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Pivot Group

Nature of Debt (Purpose):

Mail Piece Production, Printing and Postage,
Amount Adjust to Reflect Actual CostMailing Address 1015 15th St NW
Ste 600City
WashingtonState
DCZip Code
20005-2605

Outstanding Balance Beginning This Period

0.00

Transaction ID : VTYQS9H5NS3

Amount Incurred This Period

62224.77

Payment This Period

0.00

Outstanding Balance at Close of This Period

62224.77

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Twitter

Nature of Debt (Purpose):

Digital Advertising

Mailing Address 1355 Market St
Ste 900City
San FranciscoState
CAZip Code
94103-1337

Outstanding Balance Beginning This Period

0.00

Transaction ID : VTYQS9H5NT1

Amount Incurred This Period

1645.82

Payment This Period

0.00

Outstanding Balance at Close of This Period

1645.82

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

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

63870.59

2) TOTALS This Period (last page this line number only)..... ►

127628.77

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

127628.77

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 66 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee 4C Partners LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 19 / 2018	
Mailing Address 718 7th St NW			Amount 5000.00	
City Washington	State DC	Zip Code 20001-3782	Transaction ID : VV0P99HA3E7 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 11 / 06 / 2018	
Purpose of Expenditure Actual Cost for Digital Advertising Production As Disclosed on 10/19 24-Hr Report		Category/Type 004		
Name of Federal Candidate: Heller, Dean, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NV <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 256121.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Alamy <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 23 / 2018	
Mailing Address 20 Jay St Ste 848			Amount 15.00	
City Brooklyn	State NY	Zip Code 11201-8306	Transaction ID : VV0P99HADT2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y	
Purpose of Expenditure Photo Licensing		Category/Type 004		
Name of Federal Candidate: Craig, Angela, Dawn, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 02 State: MN <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 170162.12			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures			5000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Hubbard, Tshombe, , ,</i>			Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	
[Electronically Filed]				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 67 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Alamy *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2018
Mailing Address 20 Jay St Ste 848			City Brooklyn		State NY
Zip Code 11201-8306			Amount MM / DD / YYYY 15.00		Transaction ID : VV0P99HADV0
Purpose of Expenditure Photo Licensing			Category/ Type 004		Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate: Lewis, Jason, Mark, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>02</u> State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY 170162.12			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Associated Press			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 14 / 2018
Mailing Address 200 Liberty St			City New York		State NY
Zip Code 10281-1003			Amount MM / DD / YYYY 82.50		Transaction ID : VV0P99HAWH5
Purpose of Expenditure Payment and Actual Amount for Digital Advertising As Disclosed on October Quarterly Report			Category/ Type 004		Date of Disbursement or Obligation MM / DD / YYYY 11 / 20 / 2018
Name of Federal Candidate: Phillips, Dean, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>03</u> State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY 125.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures					MM / DD / YYYY 82.50
(b) SUBTOTAL of Unitemized Independent Expenditures.....					MM / DD / YYYY
(c) TOTAL Independent Expenditures					MM / DD / YYYY
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			[Electronically Filed]		Date MM / DD / YYYY 06 / 17 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 68 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY				
Full Name of Payee <input type="checkbox"/> Memo Item Associated Press			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 08 / 14 / 2018 </div>	
Mailing Address 200 Liberty St			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">167.50</div>	
City New York	State NY	Zip Code 10281-1003	Transaction ID : VV0P99HAWJ3 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 11 / 20 / 2018 </div>	
Purpose of Expenditure Payment and Actual Amount for Digital Advertising As Disclosed on October Quarterly Report			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Lewis, Jason, Mark, ,			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Berg, Miriam, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 10 / 18 / 2018 </div>	
Mailing Address 2530 Q St NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">255.00</div>	
City Washington	State DC	Zip Code 20007-4308	Transaction ID : VV0P99HA348 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Purpose of Expenditure Digital Advertising Production			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Wallace, Henry, Scott, ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">167.50</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
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 (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Hubbard, Tshombe, , ,</u>			Date MM / DD / YYYY <div style="display: flex; justify-content: space-between;"> 06 / 17 / 2019 </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Berg, Miriam, , , *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 18 / 2018
Mailing Address 2530 Q St NW			Amount 255.00		Transaction ID : VV0P99HAXR1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y
City Washington	State DC	Zip Code 20007-4308			
Purpose of Expenditure Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: O'Connor, Daniel, Jay, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 12 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 290.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Berg, Miriam, , , *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 23 / 2018
Mailing Address 2530 Q St NW			Amount 297.50		Transaction ID : VV0P99HADP0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y
City Washington	State DC	Zip Code 20007-4308			
Purpose of Expenditure Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Phillips, Dean, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought 201628.36			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			Date M M / D D / Y Y Y Y Y 06 / 17 / 2019		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Berg, Miriam, , , * <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 23 / 2018	
Mailing Address 2530 Q St NW		Amount 297.50	
City Washington	State DC	Zip Code 20007-4308	Transaction ID : VV0P99HADQ8
Purpose of Expenditure Digital Advertising Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y
Name of Federal Candidate: Paulsen, Erik, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought 201628.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Berg, Miriam, , , * <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 23 / 2018	
Mailing Address 2530 Q St NW		Amount 297.50	
City Washington	State DC	Zip Code 20007-4308	Transaction ID : VV0P99HADR6
Purpose of Expenditure Digital Advertising Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y
Name of Federal Candidate: Craig, Angela, Dawn, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought 170162.12		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Hubbard, Tshombe, , ,</i>		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Berg, Miriam, , , *			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2018	
Mailing Address 2530 Q St NW			Amount 297.50	
City Washington	State DC	Zip Code 20007-4308	Transaction ID : VV0P99HADS4 Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure Digital Advertising Production		Category/ Type 004		
Name of Federal Candidate: Lewis, Jason, Mark, ,			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought 170162.12			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Blueprint Interactive			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 18 / 2018	
Mailing Address 2229 N Pollard St			Amount 50000.00	
City Arlington	State VA	Zip Code 22207-3855	Transaction ID : VV0P99HA330 Date of Disbursement or Obligation MM / DD / YYYY 10 / 18 / 2018	
Purpose of Expenditure Digital Advertising Production and Buy		Category/ Type 004		
Name of Federal Candidate: Fitzpatrick, Brian, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 1852246.19			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			50000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Hubbard, Tshombe, , ,</i>			Date MM / DD / YYYY 06 / 17 / 2019	
[Electronically Filed]				

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ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Blueprint Interactive <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 24 / 2018	
Mailing Address 2229 N Pollard St		Amount 93750.00	
City Arlington	State VA	Zip Code 22207-3855	Transaction ID : VV0P99HAE09 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 22 / 2018
Purpose of Expenditure Digital Advertising Production and Buy		Category/Type 004	
Name of Federal Candidate: Craig, Angela, Dawn, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: MN	
Calendar Year-To-Date Per Election for Office Sought 170162.12		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Blueprint Interactive <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 24 / 2018	
Mailing Address 2229 N Pollard St		Amount 31250.00	
City Arlington	State VA	Zip Code 22207-3855	Transaction ID : VV0P99HAE17 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 22 / 2018
Purpose of Expenditure Digital Advertising Production and Buy		Category/Type 004	
Name of Federal Candidate: Smith, Tina, Flint, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: MN	
Calendar Year-To-Date Per Election for Office Sought 33160.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		125000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Hubbard, Tshombe, ,</i>		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee <input type="checkbox"/> Memo Item Blueprint Interactive			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 24 / 2018	
Mailing Address 2229 N Pollard St			Amount 75000.00	
City Arlington	State VA	Zip Code 22207-3855	Transaction ID : VV0P99HAE25 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 22 / 2018	
Purpose of Expenditure Digital Advertising Production and Buy			Category/Type 004	
Name of Federal Candidate: Phillips, Dean, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought 201628.36			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Chong + Koster *			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2018	
Mailing Address 1640 Rhode Island Ave NW Ste 600			Amount 1250.00	
City Washington	State DC	Zip Code 20036-3229	Transaction ID : VV0P99HAGH7 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure Digital Advertising Production			Category/Type 004	
Name of Federal Candidate: Hawley, Joshua, David, ,			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MO	
Calendar Year-To-Date Per Election for Office Sought 10035.02			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			75000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Hubbard, Tshombe, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Chong + Koster			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1640 Rhode Island Ave NW Ste 600			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1250.00</div>	
City Washington	State DC	Zip Code 20036-3229	Transaction ID : VV0P99HAGJ5 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: Heller, Dean, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">256121.72</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Chong + Koster			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1640 Rhode Island Ave NW Ste 600			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1250.00</div>	
City Washington	State DC	Zip Code 20036-3229	Transaction ID : VV0P99HAGK3 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: McSally, Martha, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1417622.11</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Chong + Koster *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 1640 Rhode Island Ave NW Ste 600				
City Washington	State DC	Zip Code 20036-3229	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1250.00</div>	
Purpose of Expenditure Digital Advertising Production			Transaction ID : VV0P99HAGM1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Scott, Rick, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">134897.46</div>				

Full Name of Payee <input type="checkbox"/> Memo Item Chong + Koster			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">02</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 1640 Rhode Island Ave NW Ste 600				
City Washington	State DC	Zip Code 20036-3229	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2500.00</div>	
Purpose of Expenditure Digital Advertising Buy			Transaction ID : VV0P99HAHJ8 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: McSally, Martha, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1417622.11</div>				

(a) SUBTOTAL of Itemized Independent Expenditures	▶	2500.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY											
Full Name of Payee <input type="checkbox"/> Memo Item Chong + Koster				Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2018							
Mailing Address 1640 Rhode Island Ave NW Ste 600				Amount 2500.00							
City Washington		State DC	Zip Code 20036-3229	Transaction ID : VV0P99HAHK6 Date of Disbursement or Obligation MM / DD / YYYY 11 / 07 / 2018							
Purpose of Expenditure Digital Advertising Buy				Category/ Type 004							
Name of Federal Candidate: Scott, Rick, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>							
Calendar Year-To-Date Per Election for Office Sought 134897.46				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____							
Full Name of Payee <input type="checkbox"/> Memo Item Chong + Koster				Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2018							
Mailing Address 1640 Rhode Island Ave NW Ste 600				Amount 2500.00							
City Washington		State DC	Zip Code 20036-3229	Transaction ID : VV0P99HAHM4 Date of Disbursement or Obligation MM / DD / YYYY 11 / 07 / 2018							
Purpose of Expenditure Digital Advertising Buy				Category/ Type 004							
Name of Federal Candidate: Hawley, Joshua, David, ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MO</u>							
Calendar Year-To-Date Per Election for Office Sought 10035.02				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____							
<table style="width: 100%;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width: 40%; text-align: right;">5000.00</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures</td> <td></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	5000.00	(b) SUBTOTAL of Unitemized Independent Expenditures.....		(c) TOTAL Independent Expenditures	
(a) SUBTOTAL of Itemized Independent Expenditures	5000.00										
(b) SUBTOTAL of Unitemized Independent Expenditures.....											
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>Hubbard, Tshombe, , ,</u>				Date MM / DD / YYYY 06 / 17 / 2019							

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Chong + Koster			<input type="checkbox"/> Memo Item		
Mailing Address 1640 Rhode Island Ave NW Ste 600			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2018		
City Washington	State DC	Zip Code 20036-3229	Amount 2500.00		
Purpose of Expenditure Digital Advertising Buy		Category/ Type 004	Transaction ID : VV0P99HAHN1 Date of Disbursement or Obligation MM / DD / YYYY 11 / 07 / 2018		
Name of Federal Candidate: Heller, Dean, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV		
Calendar Year-To-Date Per Election for Office Sought 256121.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Community Outreach Group LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1110 Vermont Ave NW Ste 300			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 29 / 2018		
City Washington	State DC	Zip Code 20005-6300	Amount 92230.43		
Purpose of Expenditure Final Payment for Canvassing Services, As Disclosed on 8/31 48-hr Report		Category/ Type 004	Transaction ID : VV0P99HAW84 Date of Disbursement or Obligation MM / DD / YYYY 10 / 30 / 2018		
Name of Federal Candidate: Sinema, Kyrsten, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: AZ		
Calendar Year-To-Date Per Election for Office Sought 1417622.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			94730.43		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date MM / DD / YYYY 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Community Outreach Group LLC *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2018
Mailing Address 1110 Vermont Ave NW Ste 300			Amount 15740.00		Transaction ID : VV0P99HAHP9 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Washington	State DC	Zip Code 20005-6300			
Purpose of Expenditure Canvassing Services		Category/ Type 004			
Name of Federal Candidate: Sinema, Kyrsten, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought 1417622.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Facebook *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2018
Mailing Address 1601 Willow Rd			Amount 500.00		Transaction ID : VV0P99HAGN9 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Menlo Park	State CA	Zip Code 94025-1452			
Purpose of Expenditure Digital Advertising		Category/ Type 004			
Name of Federal Candidate: Hawley, Joshua, David, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MO</u>
Calendar Year-To-Date Per Election for Office Sought 10035.02			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Hubbard, Tshombe, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019

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ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on	
Full Name of Payee Facebook *			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>11 / 01 / 2018</div> </div>	
Mailing Address 1601 Willow Rd			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">500.00</div>	
City Menlo Park	State CA	Zip Code 94025-1452	Transaction ID : VV0P99HAGP7 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div></div> </div>	
Purpose of Expenditure Digital Advertising		Category/Type 004		
Name of Federal Candidate: Heller, Dean, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Facebook *			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>11 / 01 / 2018</div> </div>	
Mailing Address 1601 Willow Rd			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">500.00</div>	
City Menlo Park	State CA	Zip Code 94025-1452	Transaction ID : VV0P99HAGQ4 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div></div> </div>	
Purpose of Expenditure Digital Advertising		Category/Type 004		
Name of Federal Candidate: McSally, Martha, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
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 (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Hubbard, Tshombe, , ,</u>			Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>06 / 17 / 2019</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Facebook *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2018
Mailing Address 1601 Willow Rd			Amount 500.00		Transaction ID : VV0P99HAGR2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Menlo Park	State CA	Zip Code 94025-1452			
Purpose of Expenditure Digital Advertising		Category/ Type 004			
Name of Federal Candidate: Scott, Rick, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: FL
Calendar Year-To-Date Per Election for Office Sought 134897.46			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Facebook *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2018
Mailing Address 1601 Willow Rd			Amount 625.00		Transaction ID : VV0P99HAHY3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Menlo Park	State CA	Zip Code 94025-1452			
Purpose of Expenditure Digital Advertising		Category/ Type 004			
Name of Federal Candidate: Hawley, Joshua, David, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: MO
Calendar Year-To-Date Per Election for Office Sought 10035.02			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Facebook * <input checked="" type="checkbox"/> Memo Item Mailing Address 1601 Willow Rd City Menlo Park State CA Zip Code 94025-1452 Purpose of Expenditure Digital Advertising Category/Type 004			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 11 / 03 / 2018 </div> Amount 312.50 Transaction ID : VV0P99HAHZ0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate: Heller, Dean, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV	
Calendar Year-To-Date Per Election for Office Sought 256121.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Facebook * <input checked="" type="checkbox"/> Memo Item Mailing Address 1601 Willow Rd City Menlo Park State CA Zip Code 94025-1452 Purpose of Expenditure Digital Advertising Category/Type 004			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 11 / 03 / 2018 </div> Amount 312.50 Transaction ID : VV0P99HAJ08 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate: McCaskill, Claire, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MO	
Calendar Year-To-Date Per Election for Office Sought 10035.02			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures ▶ 0.00			(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶ 	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Hubbard, Tshombe, , ,</u>			Date M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 06 / 17 / 2019 </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y

Full Name of Payee Facebook * <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address 1601 Willow Rd			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">312.50</div>	
City Menlo Park	State CA	Zip Code 94025-1452	Transaction ID : VV0P99HAJ16 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input type="checkbox"/> Support McSally, Martha, , , <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1417622.11</div>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee Facebook * <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address 1601 Willow Rd			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">312.50</div>	
City Menlo Park	State CA	Zip Code 94025-1452	Transaction ID : VV0P99HAJ24 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input type="checkbox"/> Support Scott, Rick, , , <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">134897.46</div>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures	►	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	►	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Facebook			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1601 Willow Rd			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>	
City Menlo Park	State CA	Zip Code 94025-1452	Transaction ID : VV0P99HAXG8 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising		Category/ Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose McSally, Martha, , ,	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Facebook			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1601 Willow Rd			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>	
City Menlo Park	State CA	Zip Code 94025-1452	Transaction ID : VV0P99HAXH5 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising		Category/ Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Scott, Rick, , ,	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Facebook *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2018
Mailing Address 1601 Willow Rd			Amount 250.00		Transaction ID : VV0P99HAXJ3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Menlo Park	State CA	Zip Code 94025-1452			
Purpose of Expenditure Digital Advertising		Category/ Type 004			
Name of Federal Candidate: Heller, Dean, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV
Calendar Year-To-Date Per Election for Office Sought 256121.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Facebook *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2018
Mailing Address 1601 Willow Rd			Amount 250.00		Transaction ID : VV0P99HAXK1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Menlo Park	State CA	Zip Code 94025-1452			
Purpose of Expenditure Digital Advertising		Category/ Type 004			
Name of Federal Candidate: Hawley, Joshua, David, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MO
Calendar Year-To-Date Per Election for Office Sought 10035.02			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>				
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Facebook *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">04</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 1601 Willow Rd			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>	
City Menlo Park	State CA	Zip Code 94025-1452	Transaction ID : VV0P99HAXM9 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Paulsen, Erik, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">201628.36</div>				
Full Name of Payee <input type="checkbox"/> Memo Item Farmworker Educational Radio Network, Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">24</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address PO Box 62			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5831.45</div>	
City Keene	State CA	Zip Code 93531-0062	Transaction ID : VV0P99HADW8 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Actual Cost for Radio Advertising Buy As Disclosed on 10/29 24-Hr Report			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Rosen, Jacky, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">256121.72</div>				
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">5831.45</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
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 (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Hubbard, Tshombe, , ,</u>			Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">17</div> <div style="border: 1px solid black; padding: 2px;">2019</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>				
Full Name of Payee <input type="checkbox"/> Memo Item Farmworker Educational Radio Network, Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">24</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address PO Box 62			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 3446.45 </div>	
City Keene	State CA	Zip Code 93531-0062	Transaction ID : VV0P99HADX5 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">23</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Purpose of Expenditure Actual Cost for Radio Advertising Buy As Disclosed on 10/29 24-Hr Report			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Sinema, Kyrsten, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 1417622.11 </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ► _____	
Full Name of Payee <input type="checkbox"/> Memo Item Florida Alliance of Planned Parenthood Affiliates			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">18</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 736 Central Ave			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 1858.56 </div>	
City Sarasota	State FL	Zip Code 34236-4042	Transaction ID : VV0P99HA2M2 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">26</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Purpose of Expenditure Phone Banking			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Nelson, Bill, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 134897.46 </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ► _____	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 5305.01 </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div>	
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div>	
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 (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Hubbard, Tshombe, , ,</u>			Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">17</div> <div style="border: 1px solid black; padding: 2px;">2019</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item Florida Alliance of Planned Parenthood Affiliates			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 736 Central Ave			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1858.56</div>	
City Sarasota	State FL	Zip Code 34236-4042	Transaction ID : VV0P99HA2N9 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Phone Banking		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support Scott, Rick, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">134897.46</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Florida Alliance of Planned Parenthood Affiliates			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 736 Central Ave			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1858.56</div>	
City Sarasota	State FL	Zip Code 34236-4042	Transaction ID : VV0P99HA2P7 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Canvassing Services		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support Scott, Rick, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">134897.46</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	3717.12
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on	
Full Name of Payee Florida Alliance of Planned Parenthood Affiliates		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 18 / 2018	
Mailing Address 736 Central Ave		Amount 1858.56	
City Sarasota	State FL	Zip Code 34236-4042	Transaction ID : VV0P99HA2Q5
Purpose of Expenditure Canvassing Services		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 26 / 2018
Name of Federal Candidate: Nelson, Bill, , ,		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Florida Alliance of Planned Parenthood Affiliates		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 18 / 2018	
Mailing Address 736 Central Ave		Amount 2478.08	
City Sarasota	State FL	Zip Code 34236-4042	Transaction ID : VV0P99HA2R3
Purpose of Expenditure Digital Communications		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 26 / 2018
Name of Federal Candidate: Nelson, Bill, , ,		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		4336.64	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Hubbard, Tshombe, , ,</i>		Date MM / DD / YYYY 06 / 17 / 2019	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE	89	OF	283
FOR LINE 24 OF FORM 3X			

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee <input type="checkbox"/> Memo Item Florida Alliance of Planned Parenthood Affiliates			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2018	
Mailing Address 736 Central Ave			Amount 2478.08	
City Sarasota	State FL	Zip Code 34236-4042	Transaction ID : VV0P99HA2S1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2018	
Purpose of Expenditure Digital Communications		Category/ Type 004		
Name of Federal Candidate: Scott, Rick, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought 134897.46		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2018	
Mailing Address 1750 30th St # 217			Amount 50.00	
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HA2V7 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure Digital Advertising Production		Category/ Type 004		
Name of Federal Candidate: Heller, Dean, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought 256121.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			2478.08	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Hubbard, Tshombe, , ,</u>		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Garcimonde-Fisher, Lauren, , , *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2018
Mailing Address 1750 30th St # 217			Amount 200.00		Transaction ID : VV0P99HA322
City Boulder		State CO	Zip Code 80301-1029		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Fitzpatrick, Brian, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: PA
Calendar Year-To-Date Per Election for Office Sought 1852246.19			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Garcimonde-Fisher, Lauren, , , *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2018
Mailing Address 1750 30th St # 217			Amount 50.00		Transaction ID : VV0P99HA306
City Boulder		State CO	Zip Code 80301-1029		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Heller, Dean, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: NV
Calendar Year-To-Date Per Election for Office Sought 256121.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures					0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 300px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>				
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50.00</div>	
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HA314 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Purpose of Expenditure Digital Advertising Production			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Rosen, Jacky, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: NV </div> </div>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">256121.72</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶				
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">100.00</div>	
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HA397 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Purpose of Expenditure Mail Piece Production			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: McSally, Martha, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: AZ </div> </div>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">1417622.11</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>				
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 (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Hubbard, Tshombe, , ,</u>			Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
[Electronically Filed]			06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 92 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-around;"> 10 19 2018 </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 425.00 </div>	
City Boulder	State CO	Zip Code 80301-1029		
Purpose of Expenditure Mail Piece Production		Category/ Type 004	Transaction ID : VV0P99HA3A5 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Name of Federal Candidate: Roskam, Peter, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IL</u>	
Calendar Year-To-Date Per Election for Office Sought 422762.16			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-around;"> 10 19 2018 </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 800.00 </div>	
City Boulder	State CO	Zip Code 80301-1029		
Purpose of Expenditure Mail Piece Production		Category/ Type 004	Transaction ID : VV0P99HA3B3 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Name of Federal Candidate: Heller, Dean, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought 256121.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶ 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

MM / DD / YYYY

06
17
2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 93 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-around;"> 10 22 2018 </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 50.00 </div>	
City Boulder	State CO	Zip Code 80301-1029		
Purpose of Expenditure Mail Piece Production		Category/ Type 004	Transaction ID : VV0P99HA3V8 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div>	
Name of Federal Candidate: Sinema, Kyrsten, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>	
Calendar Year-To-Date Per Election for Office Sought 1417622.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-around;"> 10 22 2018 </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 50.00 </div>	
City Boulder	State CO	Zip Code 80301-1029		
Purpose of Expenditure Mail Piece Production		Category/ Type 004	Transaction ID : VV0P99HA3W6 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div>	
Name of Federal Candidate: McSally, Martha, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>	
Calendar Year-To-Date Per Election for Office Sought 1417622.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>10</div> <div>24</div> <div>2018</div> </div>	
Mailing Address 1750 30th St # 217				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">16.67</div>	
City Boulder		State CO		Zip Code 80301-1029	
Purpose of Expenditure Mail Piece Production				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: Sinema, Kyrsten, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1417622.11</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>10</div> <div>24</div> <div>2018</div> </div>	
Mailing Address 1750 30th St # 217				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">56.26</div>	
City Boulder		State CO		Zip Code 80301-1029	
Purpose of Expenditure Digital Advertising Production				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: Craig, Angela, Dawn, ,				Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">170162.12</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>06</div> <div>17</div> <div>2019</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1875.00</div>		
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HADK6 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Smith, Tina, Flint, ,		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">33160.86</div>		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: <input type="text"/> State: <input type="text"/> MN			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">75.00</div>		
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HADM4 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Phillips, Dean, , ,		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">201628.36</div>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: <input type="text"/> State: <input type="text"/> MN			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Hubbard, Tshombe, , , [Electronically Filed]

Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">16.67</div>	
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HAF36 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Mail Piece Production		Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	Name of Federal Candidate: <input type="checkbox"/> Support Marquez Peterson, Lea, , , <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">23930.77</div>			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">37.50</div>	
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HAEC4 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support Baer, Lauren, , , <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">18695.18</div>			Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 98 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Garcimonde-Fisher, Lauren, , , *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Mailing Address 1750 30th St # 217			Amount 37.50		Transaction ID : VV0P99HAED2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Boulder		State CO			
Purpose of Expenditure Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Mast, Brian, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 18 State: FL
Calendar Year-To-Date Per Election for Office Sought			18695.18		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Garcimonde-Fisher, Lauren, , , *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Mailing Address 1750 30th St # 217			Amount 50.00		Transaction ID : VV0P99HAEE0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City Boulder		State CO			
Purpose of Expenditure Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Scott, Rick, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: FL
Calendar Year-To-Date Per Election for Office Sought			134897.46		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures					0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Hubbard, Tshombe, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 99 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">50.00</div>	
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HAEF8 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising Production			Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: Nelson, Bill, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">134897.46</div>				

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">25.00</div>	
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HAE66 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Mail Piece Production			Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: Faso, John, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">439996.14</div>				

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 100 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">60.00</div>	
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HAEJ1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising Production			Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: Bishop, Mike, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">40.00</div>	
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HAEK9 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising Production			Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: Slotkin, Elissa, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 102 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Garcimonde-Fisher, Lauren, , , *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 29 / 2018
Mailing Address 1750 30th St # 217			Amount 25.00		Transaction ID : VV0P99HAF93 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y
City Boulder	State CO	Zip Code 80301-1029			
Purpose of Expenditure Mail Piece Production		Category/ Type 004			
Name of Federal Candidate: Faso, John, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 439996.14			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Garcimonde-Fisher, Lauren, , , *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 29 / 2018
Mailing Address 1750 30th St # 217			Amount 25.00		Transaction ID : VV0P99HAFE3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y
City Boulder	State CO	Zip Code 80301-1029			
Purpose of Expenditure Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Nelson, Bill, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 134897.46			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 103 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , * Vendor Origin. Disclosed as Pivot Group				Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1750 30th St # 217				Amount <input type="text"/> 150.00	
City Boulder		State CO		Zip Code 80301-1029	
Purpose of Expenditure Mail Piece Production				Category/Type <input type="text"/> 004	
Name of Federal Candidate: Heller, Dean, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: NV	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 256121.72				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *				Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1750 30th St # 217				Amount <input type="text"/> 12.50	
City Boulder		State CO		Zip Code 80301-1029	
Purpose of Expenditure Mail Piece Production				Category/Type <input type="text"/> 004	
Name of Federal Candidate: Casten, Sean, , ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: 06 <input type="checkbox"/> State: IL	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 422762.16				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures ▶				<input type="text"/> 0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶				<input type="text"/>	
(c) TOTAL Independent Expenditures ▶				<input type="text"/>	
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date <input type="text"/> / <input type="text"/> / <input type="text"/>	
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 105 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2018	
Mailing Address 1750 30th St # 217		Amount 25.00	
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HAG13 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure Digital Advertising Production		Category/ Type 004	
Name of Federal Candidate: Rosen, Jacky, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought 256121.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2018	
Mailing Address 1750 30th St # 217		Amount 12.50	
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HAG21 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure Mail Piece Production		Category/ Type 004	
Name of Federal Candidate: Delgado, Antonio, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought 439996.14		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,
[Electronically Filed]

Signature _____ Date M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 106 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50.00</div> Transaction ID : VV0P99HAG38 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
City Boulder	State CO	Zip Code 80301-1029	
Purpose of Expenditure Mail Piece Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support Sinema, Kyrsten, , , <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1417622.11</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50.00</div> Transaction ID : VV0P99HAG46 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
City Boulder	State CO	Zip Code 80301-1029	
Purpose of Expenditure Mail Piece Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <input type="checkbox"/> Support McSally, Martha, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1417622.11</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

06

17

2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 107 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00489799 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">12.50</div>	
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HAG54 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Mail Piece Production		Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>		
Name of Federal Candidate: <input type="checkbox"/> Support Faso, John, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">439996.14</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , * Vendor Origin. Disclosed as Pivot Group			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">150.00</div>	
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HAZD9 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Mail Piece Production		Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>		
Name of Federal Candidate: <input type="checkbox"/> Support Heller, Dean, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">256121.72</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2018	
Mailing Address 1750 30th St # 217				Amount 75.00	
City Boulder		State CO		Zip Code 80301-1029	
Purpose of Expenditure Digital Advertising Production				Category/ Type 004	
Name of Federal Candidate: Faso, John, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 439996.14				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2018	
Mailing Address 1750 30th St # 217				Amount 66.66	
City Boulder		State CO		Zip Code 80301-1029	
Purpose of Expenditure Digital Advertising Production				Category/ Type 004	
Name of Federal Candidate: Hawley, Joshua, David, ,				Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MO	
Calendar Year-To-Date Per Election for Office Sought 10035.02				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>				Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Garcimonde-Fisher, Lauren, , , *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2018
Mailing Address 1750 30th St # 217			Amount 79.16		Transaction ID : VV0P99HAGV6
City Boulder		State CO	Zip Code 80301-1029		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Heller, Dean, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought 256121.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Garcimonde-Fisher, Lauren, , , *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2018
Mailing Address 1750 30th St # 217			Amount 66.66		Transaction ID : VV0P99HAGW4
City Boulder		State CO	Zip Code 80301-1029		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: McSally, Martha, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: AZ
Calendar Year-To-Date Per Election for Office Sought 1417622.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures					0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>11 / 01 / 2018</div> </div>		
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">12.50</div>		
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HAGX2 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div></div> </div>		
Purpose of Expenditure Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: Nelson, Bill, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">134897.46</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Garcimonde-Fisher, Lauren, , , *			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>11 / 01 / 2018</div> </div>		
Mailing Address 1750 30th St # 217			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">25.00</div>		
City Boulder	State CO	Zip Code 80301-1029	Transaction ID : VV0P99HAGY0 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div></div> </div>		
Purpose of Expenditure Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">256121.72</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

Signature

[Electronically Filed]

Date / /

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06 / 17 / 2019

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Garcimonde-Fisher, Lauren, , , *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 11 / 01 / 2018
Mailing Address 1750 30th St # 217			City Boulder		State CO
Zip Code 80301-1029			Amount 75.00		Transaction ID : VV0P99HAGZ8
Purpose of Expenditure Digital Advertising Production			Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y
Name of Federal Candidate: Roskam, Peter, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>06</u> State: <u>IL</u>
Calendar Year-To-Date Per Election for Office Sought 422762.16			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Garcimonde-Fisher, Lauren, , , *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 11 / 01 / 2018
Mailing Address 1750 30th St # 217			City Boulder		State CO
Zip Code 80301-1029			Amount 66.66		Transaction ID : VV0P99HAH06
Purpose of Expenditure Digital Advertising Production			Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y
Name of Federal Candidate: Scott, Rick, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 134897.46			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures					0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee House Majority PAC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2018		
Mailing Address 700 13th St NW Ste 600			Amount 1000.00		
City Washington	State DC	Zip Code 20005-5998	Transaction ID : VV0P99HAKN5		
Purpose of Expenditure Research Services		Category/Type 005	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2018		
Name of Federal Candidate: Fitzpatrick, Brian, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
1852246.19					
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAMC7		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Phillips, Dean, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
201628.36					
(a) SUBTOTAL of Itemized Independent Expenditures			1035.86		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Transaction ID : VV0P99HAMD5 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Casten, Sean, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 06 State: IL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">422762.16</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Transaction ID : VV0P99HAME3 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Delgado, Antonio, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 19 State: NY	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">439996.14</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	71.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

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17

2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAMF0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Craig, Angela, Dawn, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>MN</u>		
Calendar Year-To-Date Per Election for Office Sought 170162.12			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAMG8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Nelson, Bill, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought 134897.46			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Amount 35.86			Transaction ID : VV0P99HAMH6 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Sewell, Terri, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 07 State: AL		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Amount 35.86			Transaction ID : VV0P99HAMJ4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: O'Halleran, Tom, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 01 State: AZ		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 116 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Grijalva, Raul, M., ,				Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Feinstein, Dianne, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">71.72</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">17</div> <div style="border: 1px solid black; padding: 2px;">2019</div> </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 117 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAMN8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Gallego, Ruben, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>		
Calendar Year-To-Date Per Election for Office Sought		35.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAMP6 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Thompson, Mike, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>05</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought		35.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 119 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 35.86 </div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAMS9 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: McNerney, Gerald, Mark, ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 35.86 </div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAMT7 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Desaulnier, Mark, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 71.72 </div>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>		
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>		
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 120 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAMV5		
Purpose of Expenditure Payment for Digital Advertising Production			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Category/Type 004					
Name of Federal Candidate: Pelosi, Nancy, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 12 State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
35.86					
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAMW3		
Purpose of Expenditure Payment for Digital Advertising Production			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Category/Type 004					
Name of Federal Candidate: Lee, Barbara, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 13 State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
35.86					
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 121 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAMX1		
Purpose of Expenditure Payment for Digital Advertising Production			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Category/Type 004					
Name of Federal Candidate: Speier, Jackie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
35.86					
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAMY9		
Purpose of Expenditure Payment for Digital Advertising Production			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Category/Type 004					
Name of Federal Candidate: Swalwell, Eric, Michael, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 15 State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
35.86					
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 122 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: Costa, Jim, ,				Office Sought: <input checked="" type="checkbox"/> House District: 16 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: Carbajal, Salud, O., ,				Office Sought: <input checked="" type="checkbox"/> House District: 24 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 71.72 </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 123 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HAN13 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Brownley, Julia, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>26</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HAN21 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Chu, Judy, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>27</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	71.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

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06

17

2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 124 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAN38 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Schiff, Adam, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 28 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAN46 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Cardenas, Tony, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 29 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAN54 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Sherman, Brad, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 30 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAN62 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Aguilar, Pete, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 31 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="text-align: right;"> 71.72 </div> </div>					
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Signature Hubbard, Tshombe, , ,			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Amount 35.86			Transaction ID : VV0P99HAN70 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Napolitano, Grace, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 32 State: CA		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Amount 35.86			Transaction ID : VV0P99HAN88 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Gomez, Jimmy, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 34 State: CA		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

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ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAN96 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Lieu, Ted, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>33</u> State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HANA4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Torres, Norma, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>35</u> State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

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ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HANB2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Ruiz, Raul, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 36 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HANC0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Bass, Karen, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 37 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="border: 1px solid black; padding: 5px; width: 200px;"> <p>71.72</p> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Lincoln Loop <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAND7 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Sanchez, Linda, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 38 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought		35.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HANE5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Takano, Mark, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 41 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought		35.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 130 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee Lincoln Loop <div style="text-align: right;"><input type="checkbox"/> Memo Item</div>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; font-size: small;"> 35.86 </div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HANF3 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; font-size: small;">004</div>	<div style="border: 1px solid black; padding: 2px; font-size: small;"> 35.86 </div>		
Name of Federal Candidate: Barragan, Nanette, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>44</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; font-size: small;"> 35.86 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Lincoln Loop <div style="text-align: right;"><input type="checkbox"/> Memo Item</div>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; font-size: small;"> 35.86 </div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HANG1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; font-size: small;">004</div>	<div style="border: 1px solid black; padding: 2px; font-size: small;"> 35.86 </div>		
Name of Federal Candidate: Waters, Maxine, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>43</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; font-size: small;"> 35.86 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; font-size: small;"> 71.72 </div>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; font-size: small;"> </div>		
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; font-size: small;"> </div>		
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 131 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018	
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004	
Name of Federal Candidate: Correa, Jose, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 46 State: CA	
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018	
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004	
Name of Federal Candidate: Lowenthal, Alan, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 47 State: CA	
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures </div> <div style="border: 1px solid black; padding: 5px; width: 200px;"> 71.72 </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 132 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y											
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018							
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86							
City Boulder		State CO		Zip Code 80301-6112							
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004							
Name of Federal Candidate: Vargas, Juan, Carlos, ,				Office Sought: <input checked="" type="checkbox"/> House District: 51 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA							
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018							
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86							
City Boulder		State CO		Zip Code 80301-6112							
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004							
Name of Federal Candidate: Peters, Scott, ,				Office Sought: <input checked="" type="checkbox"/> House District: 52 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA							
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width:40%; text-align: right;">71.72</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;"></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures</td> <td style="text-align: right;"></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	71.72	(b) SUBTOTAL of Unitemized Independent Expenditures.....		(c) TOTAL Independent Expenditures	
(a) SUBTOTAL of Itemized Independent Expenditures	71.72										
(b) SUBTOTAL of Unitemized Independent Expenditures.....											
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>Hubbard, Tshombe, , ,</u>				Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019							

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 133 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HANN1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Davis, Susan, A, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 53 State: CA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HANP9 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Degette, Diana, L., , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: CO	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">71.72</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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Hubbard, Tshombe, , ,

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Date

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2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 134 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: Murphy, Christopher, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: Larson, John, B, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 135 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HANS2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Courtney, Joseph, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CT</u>
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HANT0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: DeLauro, Rosa, L., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CT</u>
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="text-align: right;"> 71.72 </div> </div>					
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Signature <u>Hubbard, Tshombe, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HANV8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Norton, Eleanor, Holmes, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>01</u> State: <u>DC</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HANW6 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Carper, Thomas, R., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>DE</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 137 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HANX4 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Blunt Rochester, Lisa, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: DE		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HANY2 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Himes, Jim, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 04 State: CT		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 71.72 </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div> </div> </div>					
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Signature <u>Hubbard, Tshombe, , ,</u>			Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Transaction ID : VV0P99HANZO Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Lawson, Alfred, , , Jr			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 05 State: FL		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Transaction ID : VV0P99HAP08 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Murphy, Stephanie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 07 State: FL		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAP15 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Soto, Darren, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAP23 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Demings, Valdez, Val, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="text-align: right;"> 71.72 </div> </div>					
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Signature Hubbard, Tshombe, , ,			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAP31 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Crist, Charlie, Joseph, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought		35.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAP49 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Castor, Kathy, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought		35.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee Lincoln Loop <div style="text-align: right;"><input type="checkbox"/> Memo Item</div>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAP57 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: Hastings, Alcee, L, ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input checked="" type="checkbox"/> House District: <u>20</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u> </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶					
Full Name of Payee Lincoln Loop <div style="text-align: right;"><input type="checkbox"/> Memo Item</div>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAP65 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: Frankel, Lois, J., ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input checked="" type="checkbox"/> House District: <u>21</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u> </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">71.72</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">17</div> <div style="border: 1px solid black; padding: 2px;">2019</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 142 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Amount 35.86			Transaction ID : VV0P99HAP73 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Deutch, Theodore, Eliot, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 22 State: FL		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Amount 35.86			Transaction ID : VV0P99HAP81 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Wasserman Schultz, Debbie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 23 State: FL		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 143 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAP99 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Wilson, Frederica, S, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 24 State: FL		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAPA7 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Johnson, Henry, C. Hank, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 04 State: GA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 71.72 </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div> </div> </div>					
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Signature <u>Hubbard, Tshombe, , ,</u>			Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAPB4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Lewis, John, R., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 05 State: GA		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAPC2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Hirono, Mazie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: State: HI		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: Gabbard, Tulsi, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 02 State: HI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
 35.86			Amount 35.86 Transaction ID : VV0P99HAPD0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: Loebsack, David, Wayne, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 02 State: IA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
 35.86			Amount 35.86 Transaction ID : VV0P99HAPE8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
(a) SUBTOTAL of Itemized Independent Expenditures ▶ 71.72					
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶ 					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 146 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY														
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2018										
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86										
City Boulder		State CO		Zip Code 80301-6112										
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004										
Name of Federal Candidate: Rush, Bobby, Lee, ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL										
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶										
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2018										
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86										
City Boulder		State CO		Zip Code 80301-6112										
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004										
Name of Federal Candidate: Kelly, Robin, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL										
Calendar Year-To-Date Per Election for Office Sought 0.00				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶										
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width:5%; text-align: center;">▶</td> <td style="width:35%; border: 1px solid black; padding: 2px;">71.72</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶	71.72	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶		(c) TOTAL Independent Expenditures	▶	
(a) SUBTOTAL of Itemized Independent Expenditures	▶	71.72												
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶													
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.														
Signature <u>Hubbard, Tshombe, , ,</u>				Date MM / DD / YYYY 06 / 17 / 2019										

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 147 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAPH0		
Purpose of Expenditure Payment for Digital Advertising Production			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Category/Type 004					
Name of Federal Candidate: Quigley, Mike, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>05</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>IL</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAPJ8		
Purpose of Expenditure Payment for Digital Advertising Production			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Category/Type 004					
Name of Federal Candidate: Krishnamoorthi, S Raja, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>IL</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 148 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Amount 35.86			Transaction ID : VV0P99HAPK6 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Davis, Danny, K., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>07</u> State: <u>IL</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Amount 35.86			Transaction ID : VV0P99HAPM4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Schneider, Bradley, Scott, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>10</u> State: <u>IL</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 149 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAPN1		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Schakowsky, Janice, D., ,			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAPP9		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Foster, G. William, Bill, ,			Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 150 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY											
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2018							
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86							
City Boulder		State CO		Zip Code 80301-6112							
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004							
Name of Federal Candidate: Bustos, Cheri, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 17 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL							
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2018							
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86							
City Boulder		State CO		Zip Code 80301-6112							
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004							
Name of Federal Candidate: Carson, Julia, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 00 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN							
Calendar Year-To-Date Per Election for Office Sought 0.00				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width:40%; text-align: right;">▶ 71.72</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;">▶ </td> </tr> <tr> <td>(c) TOTAL Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶ 71.72	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ 	(c) TOTAL Independent Expenditures	▶
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 71.72										
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ 										
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>Hubbard, Tshombe, , ,</u>				Date MM / DD / YYYY 06 / 17 / 2019							

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 151 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				
City Boulder	State CO	Zip Code 80301-6112	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 35.86 </div>	
Purpose of Expenditure Payment for Digital Advertising Production			Transaction ID : VV0P99HAPS3 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Yarmuth, John, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 03 State: KY	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				
City Boulder	State CO	Zip Code 80301-6112	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 35.86 </div>	
Purpose of Expenditure Payment for Digital Advertising Production			Transaction ID : VV0P99HAPT1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Warren, Elizabeth, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: State: MA	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	71.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

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Hubbard, Tshombe, , ,

[Electronically Filed]

Date

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17

2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 152 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAPV9		
Purpose of Expenditure Payment for Digital Advertising Production			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Category/Type 004					
Name of Federal Candidate: Neal, Richard, E, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: MA		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAPW7		
Purpose of Expenditure Payment for Digital Advertising Production			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Category/Type 004					
Name of Federal Candidate: McGovern, James, P, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 02 State: MA		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 153 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAPX5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Moulton, Seth, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 06 State: MA		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAPY3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Cardin, Benjamin, L., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: State: MD		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 154 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAPZ0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Keating, William, Richard, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 09 State: MA		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAQ08 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Hoyer, Steny, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 05 State: MD		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 155 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAQ16 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Cummings, Elijah, E, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>MD</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAQ24 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: King, Angus, Stanley, , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: <u>ME</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018	
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86	
City Boulder		State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAQ32 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018	
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Pingree, Chellie, M., ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018	
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86	
City Boulder		State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAQ40 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018	
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Stabenow, Debbie, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures ▶				71.72	
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u> [Electronically Filed]				Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 157 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAQ58 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Dingell, Debbie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 12 State: MI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAQ66 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Lawrence, Brenda, Lulinar, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 14 State: MI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 71.72 </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>			Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 158 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118					
City Boulder	State CO	Zip Code 80301-6112	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HAQ74 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Klobuchar, Amy, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: MN		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">33160.86</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118					
City Boulder	State CO	Zip Code 80301-6112	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HAQ82 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Smith, Tina, Flint, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: MN		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">33160.86</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	▶	71.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

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06

17

2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 159 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAQ99 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: McCollum, Betty, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAQA7 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: McCaskill, Claire, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MO
Calendar Year-To-Date Per Election for Office Sought			10035.02		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="text-align: right;"> 71.72 </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAQB5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Clay, William, Lacy, , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 01 State: MO		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAQC3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Cleaver, Emanuel, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 05 State: MO		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018	
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86	
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAQD1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Thompson, Bennie, G., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MS	
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018	
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86	
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAQE9 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Tester, Jon, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT	
Calendar Year-To-Date Per Election for Office Sought 1527.01			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				71.72	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 162 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAQF7 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Butterfield, G. K., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NC		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAQG5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Price, David, E., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: NC		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 163 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAQH3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Adams, Alma, Shealey, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 12 State: NC		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAQJ1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Menendez, Robert, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: State: NJ		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, ,</i>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 164 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAQK8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Norcross, Donald, W., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought			35.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAQM6 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Gottheimer, Josh, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought			35.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				71.72	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 165 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86	
City Boulder		State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAQN4 Date of Disbursement or Obligation MM / DD / YYYY 10 / 25 / 2018	
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Sires, Albio, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ	
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86	
City Boulder		State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAQP2 Date of Disbursement or Obligation MM / DD / YYYY 10 / 25 / 2018	
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Pascrell, William, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ	
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				71.72	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>			[Electronically Filed]	Date MM / DD / YYYY 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAQQ0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Coleman, Bonnie, Watson, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 12 State: NJ		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAQR8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Heinrich, Martin, Trevor, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: State: NM		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 168 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
City Boulder		State CO	Zip Code 80301-6112		Transaction ID : VV0P99HAQV2 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: Gillibrand, Kirsten, Elizabeth, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
City Boulder		State CO	Zip Code 80301-6112		Transaction ID : VV0P99HAQW0 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: Jeffries, Hakeem, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">71.72</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
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Signature Hubbard, Tshombe, , ,			Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">17</div> <div style="border: 1px solid black; padding: 2px;">2019</div> </div>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 169 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAQX7 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Maloney, Carolyn, B., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 12 State: NY		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAQY5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Maloney, Sean, Patrick, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 18 State: NY		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 170 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Lincoln Loop <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAQZ3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Brown, Sherrod, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought 1440.58		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____			
Full Name of Payee Lincoln Loop <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAR01 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Beatty, Joyce, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought 35.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____			
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 171 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAR19		
Purpose of Expenditure Payment for Digital Advertising Production			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Category/Type 004					
Name of Federal Candidate: Fudge, Marcia, L., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 11 State: OH		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAR27		
Purpose of Expenditure Payment for Digital Advertising Production			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Category/Type 004					
Name of Federal Candidate: Ryan, Tim, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 13 State: OH		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAR35 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Bonamici, Suzanne, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OR</u>	
Calendar Year-To-Date Per Election for Office Sought			35.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAR43 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Blumenauer, Earl, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OR</u>	
Calendar Year-To-Date Per Election for Office Sought			35.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures					71.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature <i>Hubbard, Tshombe, , ,</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAR51 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: DeFazio, Peter, A, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>04</u> State: <u>OR</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAR69 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Schrader, Kurt, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>05</u> State: <u>OR</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 174 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: Boyle, Brendan, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 02 State: PA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: Evans, Dwight, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 03 State: PA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112		Transaction ID : VV0P99HAR92 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004		<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Lamb, Conor, , ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 17 State: PA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112		Transaction ID : VV0P99HARA0 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004		<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Clyburn, James, E., ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 06 State: SC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;">71.72</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(c) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
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Signature <u>Hubbard, Tshombe, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 176 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HARB8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Green, Alexander, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>09</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HARC6 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Gonzalez, Vicente, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>15</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 177 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HARD4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Lee, Sheila, Jackson, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>18</u> State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HARE2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/ Type 004		
Name of Federal Candidate: Castro, Joaquin, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>20</u> State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="text-align: right;"> 71.72 </div> </div>					
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Signature <u>Hubbard, Tshombe, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 178 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HARF0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Johnson, Eddie Bernice, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 30 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HARG8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Veasey, Marc, Allison, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 33 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="border: 1px solid black; padding: 5px; width: 200px;"> <p>71.72</p> </div> </div>					
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Signature Hubbard, Tshombe, , ,			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HARH5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Vela, Filemon, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 34 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought			35.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HARJ3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Doggett, Lloyd, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 35 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought			35.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 180 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Transaction ID : VV0P99HARK1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Kaine, Tim, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>		
Calendar Year-To-Date Per Election for Office Sought			35.86 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Transaction ID : VV0P99HARM9 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: McEachin, Aston, Donald, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>		
Calendar Year-To-Date Per Election for Office Sought			35.86 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 181 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HARN7 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Beyer, Donald, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: VA		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HARP5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Sanders, Bernard, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: President State: VT		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HARQ3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Welch, Peter, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: VT		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HARR1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Cantwell, Maria, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: WA		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 183 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HARS9 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Delbene, Suzan, K, ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">35.86</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HART7 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Larsen, Rick, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">35.86</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">71.72</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;"></div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 184 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Transaction ID : VV0P99HARV4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Kilmer, Derek, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 06 State: WA		
Calendar Year-To-Date Per Election for Office Sought			35.86 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Transaction ID : VV0P99HARW2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Jayapal, Pramila, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 07 State: WA		
Calendar Year-To-Date Per Election for Office Sought			35.86 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HARX0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Smith, D. Adam, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WA
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HARY8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Heck, Dennis, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WA
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="text-align: right;"> 71.72 </div> </div>					
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Signature <u>Hubbard, Tshombe, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 186 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
City Boulder	State CO	Zip Code 80301-6112	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Baldwin, Tammy, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: WI		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
City Boulder	State CO	Zip Code 80301-6112	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Moore, Gwen, S., ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: WI		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">71.72</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
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Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 187 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAS12 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Kuster, Ann, McLane, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought			35.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAS20 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Whitehouse, Sheldon, , II			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: RI
Calendar Year-To-Date Per Election for Office Sought			35.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				71.72	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, ,</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAS38 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Cicilline, David, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>RI</u>
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAS46 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Kirkpatrick, Ann, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought			23930.77		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAS53 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Tipirneni, Hiral, Vyas, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>08</u> State: <u>AZ</u> <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAS61 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Stanton, Greg, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>09</u> State: <u>AZ</u> <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004	
Name of Federal Candidate: Morse, Jessica, , ,				Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate	
District: 04 State: CA				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004	
Name of Federal Candidate: Harder, Josh, , ,				Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate	
District: 10 State: CA				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">71.72</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date [Electronically Filed] <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">17</div> <div style="border: 1px solid black; padding: 2px;">2019</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAS95		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Cox, Terrance John (TJ), , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>21</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HASA3		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Janz, Andrew, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>22</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

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ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HASB1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Hill, Katherine, Lauren, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 25 State: CA		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HASC9 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Cisneros, Gilbert, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 39 State: CA		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HASD7		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Porter, Katherine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 45 State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HASE5		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Rouda, Harley, E, , Jr.			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 48 State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HASF2 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Levin, Mike, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 49 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		

Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HASG0 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Neguse, Joseph, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		

(a) SUBTOTAL of Itemized Independent Expenditures	▶	71.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

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Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 300px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div> <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">10</div></div> <div><div style="border: 1px solid black; padding: 2px;">08</div></div> <div><div style="border: 1px solid black; padding: 2px;">2018</div></div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">35.86</div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HASH8 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div> <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">10</div></div> <div><div style="border: 1px solid black; padding: 2px;">25</div></div> <div><div style="border: 1px solid black; padding: 2px;">2018</div></div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: Crow, Jason, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 06 State: CO		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div> <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">10</div></div> <div><div style="border: 1px solid black; padding: 2px;">08</div></div> <div><div style="border: 1px solid black; padding: 2px;">2018</div></div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">35.86</div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HASJ6 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div> <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">10</div></div> <div><div style="border: 1px solid black; padding: 2px;">25</div></div> <div><div style="border: 1px solid black; padding: 2px;">2018</div></div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: Soderberg, Nancy, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 06 State: FL		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">71.72</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,			Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">06</div></div> <div><div style="border: 1px solid black; padding: 2px;">17</div></div> <div><div style="border: 1px solid black; padding: 2px;">2019</div></div> </div> </div>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 196 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HASK4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Barzee Flores, Mary, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>25</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HASM0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Mucarsel-Powell, Debbie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>26</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 197 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: McBath, Lucia, Kay, ,				Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Finkenauer, Abby, ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">71.72</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 198 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HASQ4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Axne, Cindy, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President <input type="checkbox"/> State: IA		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HASR2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Garcia, Jesus, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President <input type="checkbox"/> State: IL		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <input type="text"/> 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HASS9 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <input type="text"/> 004	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Kelly, Robin, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: IL		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 0.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <input type="text"/> 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAST7 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <input type="text"/> 004	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Londrigan, Betsy, Dirksen, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 13 State: IL		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	71.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures	

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Signature Hubbard, Tshombe, , , [Electronically Filed]

Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018	
Mailing Address 4845 Pearl East Cir Ste 118		Amount 35.86	
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HASV5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	
Name of Federal Candidate: Underwood, Lauren, A., , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 14 State: IL	
Calendar Year-To-Date Per Election for Office Sought 35.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Lincoln Loop <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018	
Mailing Address 4845 Pearl East Cir Ste 118		Amount 35.86	
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HASW3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	
Name of Federal Candidate: Watson, Liz, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: IN	
Calendar Year-To-Date Per Election for Office Sought 35.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		71.72	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures			
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Signature <i>Hubbard, Tshombe, , ,</i>		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y											
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018							
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86							
City Boulder		State CO		Zip Code 80301-6112							
Purpose of Expenditure Payment for Digital Advertising Production				Transaction ID : VV0P99HASX1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018							
Name of Federal Candidate: Davids, Sharice, , ,				<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS							
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018							
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86							
City Boulder		State CO		Zip Code 80301-6112							
Purpose of Expenditure Payment for Digital Advertising Production				Transaction ID : VV0P99HASX1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018							
Name of Federal Candidate: Davis, Paul, T., ,				<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS							
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width:40%; text-align: right;">▶ 71.72</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;">▶ </td> </tr> <tr> <td>(c) TOTAL Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶ 71.72	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ 	(c) TOTAL Independent Expenditures	▶
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 71.72										
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ 										
(c) TOTAL Independent Expenditures	▶ 										
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Signature <u>Hubbard, Tshombe, , ,</u>				Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019							

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY														
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2018										
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 35.86 </div>										
City Boulder		State CO		Zip Code 80301-6112										
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004										
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Golden, Jared, ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President State: ME										
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶										
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2018										
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 35.86 </div>										
City Boulder		State CO		Zip Code 80301-6112										
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004										
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Morgan, Matthew, Wade, ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President State: MI										
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶										
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width:5%; text-align: center;">▶</td> <td style="width:35%; border: 1px solid black; padding: 2px; text-align: right;">71.72</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;"> </td> </tr> <tr> <td>(c) TOTAL Independent Expenditures</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;"> </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶	71.72	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶		(c) TOTAL Independent Expenditures	▶	
(a) SUBTOTAL of Itemized Independent Expenditures	▶	71.72												
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶													
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.														
Signature <u>Hubbard, Tshombe, , ,</u>				Date MM / DD / YYYY 06 / 17 / 2019										

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 203 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAT13 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Jongjohn, Matt, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 06 State: MI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAT21 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Driskell, Gretchen, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 07 State: MI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 71.72 </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>			Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		

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Date

06 / 17 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 204 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAT38		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Slotkin, Elissa, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought 73335.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAT46		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Levin, Sander, M, ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>09</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 205 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAT54 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Stevens, Haley, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAT62 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Tlaib, Rashida, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought			35.86		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			Date M M / D D / Y Y Y Y Y 06 / 17 / 2019		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 206 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAT70		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Feehan, Daniel, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>01</u> State: <u>MN</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAT88		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Omar, Ilhan, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>05</u> State: <u>MN</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 207 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HAT96 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Radinovich, Joseph, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HATA4 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: VanOstran, Cort, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MO</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	71.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

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Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

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17

2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 208 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: Hoagenson, Suzanne, Renee, ,				Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MO	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: Williams, Kathleen, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MT	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 35.86 </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> 71.72 </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> </div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 209 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HATD7 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Manning, Kathy, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought		35.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HATE5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Raybould, Jane, Michelle, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE		
Calendar Year-To-Date Per Election for Office Sought		35.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 210 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HATF3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: McClure, Jessica, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 01 State: NE		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HATG1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Eastman, Kara, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 02 State: NE		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <input type="text"/> 35.86	
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HATH9 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <input type="text"/> 004	<input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Kim, Andy, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03 State: NJ	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <input type="text"/> 35.86	
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HATJ7 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <input type="text"/> 004	<input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Welle, Josh, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 04 State: NJ	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶ <input type="text"/> 71.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <input type="text"/>
(c) TOTAL Independent Expenditures	▶ <input type="text"/>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Hubbard, Tshombe, , , [Electronically Filed]

Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination		
Mailing Address 4845 Pearl East Cir Ste 118			<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
City State Zip Code Boulder CO 80301-6112		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>			
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>		Transaction ID : VV0P99HATK5 Date of Disbursement or Obligation	
Name of Federal Candidate: Malinowski, Tom, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NJ</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination		
Mailing Address 4845 Pearl East Cir Ste 118			<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
City State Zip Code Boulder CO 80301-6112		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>			
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>		Transaction ID : VV0P99HATM3 Date of Disbursement or Obligation	
Name of Federal Candidate: Sherrill, Rebecca, Michelle, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NJ</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">71.72</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div>	
Signature		Date		<div style="border: 1px solid black; padding: 2px;">06 / 17 / 2019</div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 213 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: Haaland, Debra, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NM		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: Lee, Susie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03 State: NV		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 214 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Amount 35.86			Transaction ID : VV0P99HATQ6 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Horsford, Steven, Alexzander, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>04</u> State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Amount 35.86			Transaction ID : VV0P99HATR4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Gershon, Perry, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>01</u> State: <u>NY</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature <i>Hubbard, Tshombe, , ,</i>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 215 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HATS2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: Grechen Shirley, Liubov Liuba, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 02 State: NY		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HATTO Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: Rose, Max, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 11 State: NY		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 216 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HATV8 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Brindisi, Anthony, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>22</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u> <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
City Boulder	State CO	Zip Code 80301-6112		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HATW6 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Balter, Dana, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>24</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u> <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	71.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

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06

17

2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 217 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HATX4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Morelle, Joseph, D., ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 25 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought		35.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HATY2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Pureval, Aftab, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought		35.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HATZ0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Gasper, Theresa, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 10 State: OH		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAV08 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: O'Connor, Daniel, Jay, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 12 State: OH		
Calendar Year-To-Date Per Election for Office Sought 290.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

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ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAV15 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Rader, Elizabeth, Anne, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>14</u> State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAV23 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004			
Name of Federal Candidate: Neal, Rick, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>15</u> State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAV31 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: McLeod-Skinner, Jamie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>02</u> State: <u>OR</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAV49 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		
Name of Federal Candidate: Dean, Madeleine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>04</u> State: <u>PA</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 221 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y											
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018							
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86							
City Boulder		State CO		Zip Code 80301-6112							
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004							
Name of Federal Candidate: Scanlon, Mary, Gay, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA							
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018							
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86							
City Boulder		State CO		Zip Code 80301-6112							
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004							
Name of Federal Candidate: Houlihan, Chrissy, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA							
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width:40%; text-align: right;">▶ 71.72</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;">▶ </td> </tr> <tr> <td>(c) TOTAL Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶ 71.72	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ 	(c) TOTAL Independent Expenditures	▶
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 71.72										
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ 										
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>Hubbard, Tshombe, , ,</u>				Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019							

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 222 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> <div>10 / 08 / 2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">35.86</div>	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Wild, Susan, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">35.86</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> <div>10 / 08 / 2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">35.86</div>	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Scott, George, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">35.86</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">71.72</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date MM / DD / YYYY <div style="display: flex; justify-content: space-around;"> <div>06</div> <div>17</div> <div>2019</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 223 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div> <div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div> <div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div> </div>	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
Mailing Address 4845 Pearl East Cir Ste 118					Amount <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
City Boulder		State CO	Zip Code 80301-6112		Transaction ID : VV0P99HAV99
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type <input type="text" value="004"/>		Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
Name of Federal Candidate: DiNicola, Ronald, A, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>16</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
Mailing Address 4845 Pearl East Cir Ste 118					Amount <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
City Boulder		State CO	Zip Code 80301-6112		Transaction ID : VV0P99HAVA7
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type <input type="text" value="004"/>		Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
Name of Federal Candidate: O'Rourke, Robert, 'Beto', ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures					<div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....					<div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
(c) TOTAL Independent Expenditures					<div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Hubbard, Tshombe, , , Signature			[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div><div><input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/></div></div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 224 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAVB4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Fletcher, Elizabeth, Pannill, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>07</u> State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAVC2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Escobar, Veronica, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>16</u> State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAVD0		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Kopser, Joseph, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>21</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAVE8		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Ortiz Jones, Gina, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAVF6 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Garcia, Sylvia, R., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 29 State: TX		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type 004	Transaction ID : VV0P99HAVG4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Allred, Colin, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 32 State: TX		
Calendar Year-To-Date Per Election for Office Sought 35.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y

Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAVH2 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type	<div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		
Name of Federal Candidate: Steele, Dayna, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 36 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		

Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAVJ0 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>		
Purpose of Expenditure Payment for Digital Advertising Production		Category/ Type	<div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		
Name of Federal Candidate: Luria, Elaine, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		

(a) SUBTOTAL of Itemized Independent Expenditures	▶	71.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M /

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAVK8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Cockburn, Leslie, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought			35.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder		State CO	Zip Code 80301-6112		Amount 35.86
Purpose of Expenditure Payment for Digital Advertising Production			Category/Type 004		Transaction ID : VV0P99HAVM6 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Name of Federal Candidate: Spanberger, Abigail, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought			35.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				71.72	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature <i>Hubbard, Tshombe, , ,</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Transaction ID : VV0P99HAVN3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Wexton, Jennifer, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 10 State: VA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lincoln Loop			<input type="checkbox"/> Memo Item		
Mailing Address 4845 Pearl East Cir Ste 118			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
City Boulder	State CO	Zip Code 80301-6112	Amount 35.86		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Transaction ID : VV0P99HAVP1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Long, Carolyn, N, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 03 State: WA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="display: flex; justify-content: space-around;"> 10 08 2018 </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004	
Name of Federal Candidate: Brown, Lisa, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WA	
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="display: flex; justify-content: space-around;"> 10 08 2018 </div>	
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004	
Name of Federal Candidate: Schrier, Kim, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WA	
Calendar Year-To-Date Per Election for Office Sought 35.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="width: 35%; text-align: right;"> 71.72 </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date M M / D D / Y Y Y Y Y Y <div style="display: flex; justify-content: space-around;"> 06 17 2019 </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAVS5		
Purpose of Expenditure Payment for Digital Advertising Production			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Category/Type 004			Name of Federal Candidate: Bryce, Randy, , ,		
			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
35.86					
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAVT3		
Purpose of Expenditure Payment for Digital Advertising Production			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 25 / 2018		
Category/Type 004			Name of Federal Candidate: Palzewicz, Tom, , ,		
			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
			Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
35.86					
(a) SUBTOTAL of Itemized Independent Expenditures			71.72		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				
City Boulder	State CO	Zip Code 80301-6112	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
Purpose of Expenditure Payment for Digital Advertising Production			Transaction ID : VV0P99HAVV1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Kohl, Dan, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 06 State: WI	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 4845 Pearl East Cir Ste 118				
City Boulder	State CO	Zip Code 80301-6112	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div>	
Purpose of Expenditure Payment for Digital Advertising Production			Transaction ID : VV0P99HAVV9 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Pappas, Chris, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NH	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">35.86</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	71.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

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2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 233 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004	
Name of Federal Candidate: Sinema, Kyrsten, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>AZ</u>	
Calendar Year-To-Date Per Election for Office Sought 1417622.11				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item Lincoln Loop				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2018	
Mailing Address 4845 Pearl East Cir Ste 118				Amount 35.86	
City Boulder		State CO		Zip Code 80301-6112	
Purpose of Expenditure Payment for Digital Advertising Production				Category/Type 004	
Name of Federal Candidate: Rosen, Jacky, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought 256121.72				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures				71.72	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date MM / DD / YYYY 06 / 17 / 2019	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lincoln Loop			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 4845 Pearl East Cir Ste 118			Amount 35.86		
City Boulder	State CO	Zip Code 80301-6112	Transaction ID : VV0P99HAVZ2		
Purpose of Expenditure Payment for Digital Advertising Production		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
Name of Federal Candidate: Wallace, Henry, Scott, ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>		
Calendar Year-To-Date Per Election for Office Sought 1852246.19			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lockwood Strategy Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2018		
Mailing Address 1342 Florida Ave NW			Amount 1002.00		
City Washington	State DC	Zip Code 20009-4808	Transaction ID : VV0P99HA2Y1		
Purpose of Expenditure Digital Advertising Production		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 06 / 2018		
Name of Federal Candidate: Rosen, Jacky, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 256121.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			1037.86		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Lockwood Strategy Inc.				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">19</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 1342 Florida Ave NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1002.00</div>	
City Washington		State DC		Zip Code 20009-4808	
Purpose of Expenditure Digital Advertising Production				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Heller, Dean, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">256121.72</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item Lockwood Strategy Inc.				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">29</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 1342 Florida Ave NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">292.25</div>	
City Washington		State DC		Zip Code 20009-4808	
Purpose of Expenditure Digital Advertising Production				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Nelson, Bill, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: FL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">134897.46</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">1294.25</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">17</div> <div style="border: 1px solid black; padding: 2px;">2019</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on	
Full Name of Payee Lockwood Strategy Inc. <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2018	
Mailing Address 1342 Florida Ave NW		Amount 467.60	
City Washington	State DC	Zip Code 20009-4808	Transaction ID : VV0P99HAH13
Purpose of Expenditure Digital Advertising Production		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 06 / 2018
Name of Federal Candidate: Heller, Dean, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 256121.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Lockwood Strategy Inc. <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2018	
Mailing Address 1342 Florida Ave NW		Amount 41.75	
City Washington	State DC	Zip Code 20009-4808	Transaction ID : VV0P99HAH21
Purpose of Expenditure Digital Advertising Production		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 06 / 2018
Name of Federal Candidate: Nelson, Bill, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought 134897.46		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		509.35	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Hubbard, Tshombe, , ,		Date 06 / 17 / 2019	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Lockwood Strategy Inc. <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2018	
Mailing Address 1342 Florida Ave NW		Amount 509.35	
City Washington	State DC	Zip Code 20009-4808	Transaction ID : VV0P99HAH39
Purpose of Expenditure Digital Advertising Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 06 / 2018
Name of Federal Candidate: Rosen, Jacky, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u> </u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought 256121.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee M+R Strategic Services <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2018	
Mailing Address 1901 L St NW Ste 800		Amount 27450.00	
City Washington	State DC	Zip Code 20036-3510	Transaction ID : VV0P99HAES7
Purpose of Expenditure Digital Advertising Production and Buys		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2018
Name of Federal Candidate: Bishop, Mike, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought 73335.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		27959.35	
(b) SUBTOTAL of Unitemized Independent Expenditures.....		 	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Hubbard, Tshombe, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address 1901 L St NW Ste 800				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5125.00</div>	
City Washington		State DC		Zip Code 20036-3510	
Purpose of Expenditure Payment for Digital Advertising Production and Buy As Disclosed on 10/19 48-Hr Report				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Scott, Rick, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">134897.46</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address 1901 L St NW Ste 800				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5125.00</div>	
City Washington		State DC		Zip Code 20036-3510	
Purpose of Expenditure Payment for Digital Advertising Production and Buy As Disclosed on 10/19 48-Hr Report				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Nelson, Bill, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">134897.46</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures </div> <div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 10px;">10250.00</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date MM / DD / YYYY <div style="display: flex; justify-content: space-around;"> 06 17 2019 </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 239 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee M+R Strategic Services			<input type="checkbox"/> Memo Item		
Mailing Address 1901 L St NW Ste 800			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2018		
City Washington		State DC	Zip Code 20036-3510		
Purpose of Expenditure Payment for Digital Advertising Production and Buy As Disclosed on Pre-General			Category/Type 004		
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			256121.72 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee M+R Strategic Services			<input type="checkbox"/> Memo Item		
Mailing Address 1901 L St NW Ste 800			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2018		
City Washington		State DC	Zip Code 20036-3510		
Purpose of Expenditure Digital Advertising Production and Buys			Category/Type 004		
Name of Federal Candidate: Slotkin, Elissa, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought			73335.86 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			50800.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 18 / 2018	
Mailing Address 1901 L St NW Ste 800		Amount 6176.60	
City Washington	State DC	Zip Code 20036-3510	Transaction ID : VV0P99HA2T9
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 10/19 48-Hr Report		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 31 / 2018
Name of Federal Candidate: Heller, Dean, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought 256121.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 19 / 2018	
Mailing Address 1901 L St NW Ste 800		Amount 2470.64	
City Washington	State DC	Zip Code 20036-3510	Transaction ID : VV0P99HA2W5
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 10/19 48-Hr Report		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 31 / 2018
Name of Federal Candidate: Rosen, Jacky, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought 256121.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		8647.24	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Hubbard, Tshombe, , ,</i>		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee M+R Strategic Services			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2018		
Mailing Address 1901 L St NW Ste 800			Amount 2470.64		
City Washington		State DC	Zip Code 20036-3510		Transaction ID : VV0P99HA2X3
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 10/19 48-Hr Report			Category/Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2018
Name of Federal Candidate: Heller, Dean, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV
Calendar Year-To-Date Per Election for Office Sought			256121.72		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
Full Name of Payee M+R Strategic Services			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 23 / 2018		
Mailing Address 1901 L St NW Ste 800			Amount 15667.47		
City Washington		State DC	Zip Code 20036-3510		Transaction ID : VV0P99HAD56
Purpose of Expenditure Actual Cost for Digital Advertising Buy As Disclosed on 10/24 24-Hr Report			Category/Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2018
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV
Calendar Year-To-Date Per Election for Office Sought			256121.72		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2018		
(a) SUBTOTAL of Itemized Independent Expenditures			18138.11		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee M+R Strategic Services			<input type="checkbox"/> Memo Item		
Mailing Address 1901 L St NW Ste 800			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 23 / 2018		
City Washington		State DC	Zip Code 20036-3510		
Purpose of Expenditure Actual Cost for Digital Advertising Buy As Disclosed on 10/24 24-Hr Report			Category/Type 004		
Name of Federal Candidate: Heller, Dean, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 256121.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee M+R Strategic Services			<input type="checkbox"/> Memo Item		
Mailing Address 1901 L St NW Ste 800			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 24 / 2018		
City Washington		State DC	Zip Code 20036-3510		
Purpose of Expenditure Actual Cost for Digital Advertising Buy As Disclosed on 10/29 24-Hr Report			Category/Type 004		
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 256121.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			24706.39		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 24 / 2018 </div>	
Mailing Address 1901 L St NW Ste 800		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 30129.75 </div>	
City Washington	State DC	Zip Code 20036-3510	Transaction ID : VV0P99HADZ1 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 31 / 2018 </div>
Purpose of Expenditure Actual Cost for Digital Advertising Buy As Disclosed on 10/29 24-Hr Report		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Heller, Dean, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 25 / 2018 </div>	
Mailing Address 1901 L St NW Ste 800		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 9310.09 </div>	
City Washington	State DC	Zip Code 20036-3510	Transaction ID : VV0P99HAEN5 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 31 / 2018 </div>
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 10/26 24-Hr Report		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Baer, Lauren, , ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>18</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 39439.84 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> _____ </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> _____ </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2018	
Mailing Address 1901 L St NW Ste 800				Amount 9310.09	
City Washington		State DC		Zip Code 20036-3510	
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 10/26 24-Hr Report				Category/Type 004	
Name of Federal Candidate: Mast, Brian, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought 18695.18				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2018	
Mailing Address 1901 L St NW Ste 800				Amount 32841.43	
City Washington		State DC		Zip Code 20036-3510	
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 10/26 24-Hr Report				Category/Type 004	
Name of Federal Candidate: Nelson, Bill, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought 134897.46				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				42151.52	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 1901 L St NW Ste 800			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 32841.43 </div>	
City Washington	State DC	Zip Code 20036-3510		
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 10/26 24-Hr Report		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Transaction ID : VV0P99HAER9 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support Scott, Rick, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 134897.46 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">29</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 1901 L St NW Ste 800			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 13025.09 </div>	
City Washington	State DC	Zip Code 20036-3510		
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 10/30 24-Hr Report		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Transaction ID : VV0P99HAFC7 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support Nelson, Bill, , , <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 134897.46 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	45866.52
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

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Date

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17

2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 					
Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services				Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1901 L St NW Ste 800				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
City Washington		State DC		Zip Code 20036-3510	
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 11/1 24-Hr Report				Transaction ID : VV0P99HAG62 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Rosen, Jacky, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services				Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1901 L St NW Ste 800				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
City Washington		State DC		Zip Code 20036-3510	
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 11/1 24-Hr Report				Transaction ID : VV0P99HAG70 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Heller, Dean, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 1901 L St NW Ste 800				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1536.62</div>	
City Washington		State DC		Zip Code 20036-3510	
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 11/2 24-Hr Report				Transaction ID : VV0P99HAH55 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Nelson, Bill, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">134897.46</div>					
Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 1901 L St NW Ste 800				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">8124.49</div>	
City Washington		State DC		Zip Code 20036-3510	
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 11/2 24-Hr Report				Transaction ID : VV0P99HAH63 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Rosen, Jacky, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">256121.72</div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">9661.11</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">17</div> <div style="border: 1px solid black; padding: 2px;">2019</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on	
Full Name of Payee M+R Strategic Services <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2018	
Mailing Address 1901 L St NW Ste 800		Amount 6587.87	
City Washington	State DC	Zip Code 20036-3510	Transaction ID : VV0P99HAH47
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 11/2 24-Hr Report		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 08 / 2018
Name of Federal Candidate: Heller, Dean, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought 256121.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee M+R Strategic Services <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2018	
Mailing Address 1901 L St NW Ste 800		Amount 1511.51	
City Washington	State DC	Zip Code 20036-3510	Transaction ID : VV0P99HAHQ7
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 11/3 24-Hr Report		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 08 / 2018
Name of Federal Candidate: McSally, Martha, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: AZ	
Calendar Year-To-Date Per Election for Office Sought 1417622.11		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		8099.38	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Hubbard, Tshombe, , ,</i>		Date 06 / 17 / 2019	
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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee M+R Strategic Services <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2018	
Mailing Address 1901 L St NW Ste 800		Amount 1511.51	
City Washington	State DC	Zip Code 20036-3510	Transaction ID : VV0P99HAHR5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 08 / 2018
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 11/3 24-Hr Report		Category/Type 004	
Name of Federal Candidate: Scott, Rick, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: FL	
Calendar Year-To-Date Per Election for Office Sought 134897.46		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee M+R Strategic Services <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2018	
Mailing Address 1901 L St NW Ste 800		Amount 1511.51	
City Washington	State DC	Zip Code 20036-3510	Transaction ID : VV0P99HAHS3 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 08 / 2018
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 11/3 24-Hr Report		Category/Type 004	
Name of Federal Candidate: Heller, Dean, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV	
Calendar Year-To-Date Per Election for Office Sought 256121.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		3023.02	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Hubbard, Tshombe, , ,</i>		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	
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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee M+R Strategic Services			<input type="checkbox"/> Memo Item		
Mailing Address 1901 L St NW Ste 800			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 11 / 02 / 2018		
City Washington		State DC	Zip Code 20036-3510		
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 11/3 24-Hr Report			Category/Type 004		
Name of Federal Candidate: Hawley, Joshua, David, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>MO</u>		
Calendar Year-To-Date Per Election for Office Sought 10035.02			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee M+R Strategic Services			<input type="checkbox"/> Memo Item		
Mailing Address 1901 L St NW Ste 800			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 11 / 03 / 2018		
City Washington		State DC	Zip Code 20036-3510		
Purpose of Expenditure Actual Cost for Digital Advertising Buy As Disclosed on 11/4 24-Hr Report			Category/Type 004		
Name of Federal Candidate: Hawley, Joshua, David, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>MO</u>		
Calendar Year-To-Date Per Election for Office Sought 10035.02			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="width: 35%; text-align: right;"> 2515.84 </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>			Date M M / D D / Y Y Y Y Y 06 / 17 / 2019		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address 1901 L St NW Ste 800				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4619.90</div>	
City Washington		State DC		Zip Code 20036-3510	
Purpose of Expenditure Actual Cost for Digital Advertising Buy As Disclosed on 11/4 24-Hr Report				Category/Type 004	
Name of Federal Candidate: Heller, Dean, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item M+R Strategic Services				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY </div>	
Mailing Address 1901 L St NW Ste 800				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1004.33</div>	
City Washington		State DC		Zip Code 20036-3510	
Purpose of Expenditure Actual Cost for Digital Advertising Buy As Disclosed on 11/4 24-Hr Report				Category/Type 004	
Name of Federal Candidate: McSally, Martha, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: AZ	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">5624.23</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(b) SUBTOTAL of Unitemized Independent Expenditures.....</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(c) TOTAL Independent Expenditures</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date MM / DD / YYYY <div style="display: flex; justify-content: space-around;"> 06 17 2019 </div>	

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee M+R Strategic Services			<input type="checkbox"/> Memo Item		
Mailing Address 1901 L St NW Ste 800			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2018		
City Washington		State DC	Zip Code 20036-3510		
Purpose of Expenditure Actual Cost for Digital Advertising Buy As Disclosed on 11/4 24-Hr Report			Category/Type 004		
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			256121.72		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate			District: _____ State: <u>NV</u>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee M+R Strategic Services			<input type="checkbox"/> Memo Item		
Mailing Address 1901 L St NW Ste 800			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2018		
City Washington		State DC	Zip Code 20036-3510		
Purpose of Expenditure Actual Cost for Digital Advertising Buy As Disclosed on 11/4 24-Hr Report			Category/Type 004		
Name of Federal Candidate: Scott, Rick, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			134897.46		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate			District: _____ State: <u>FL</u>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			6427.68		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item O'Brien Garrett			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>08 / 10 / 2018</div> </div>	
Mailing Address 1133 19th St NW Ste 300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">564.38</div>	
City Washington	State DC	Zip Code 20036-3610		
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept. Monthly		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HAZG3 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>11 / 08 / 2018</div> </div>	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Sinema, Kyrsten, , ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: AZ	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1080.55</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item O'Brien Garrett			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>08 / 10 / 2018</div> </div>	
Mailing Address 1133 19th St NW Ste 300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">225.76</div>	
City Washington	State DC	Zip Code 20036-3610		
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept Monthly		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HAZH1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>11 / 08 / 2018</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Scott, Rick, , ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: FL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1080.55</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	790.14
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

MM / DD / YYYY

06 / 17 / 2019

Signature

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ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input type="checkbox"/> Memo Item O'Brien Garrett		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 08 / 10 / 2018 </div>	
Mailing Address 1133 19th St NW Ste 300		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 338.63 </div>	
City Washington	State DC	Zip Code 20036-3610	Transaction ID : VV0P99HAZJ9 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 08 / 2018 </div>
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept Monthly		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Nelson, Bill, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1080.55</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item O'Brien Garrett		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 08 / 10 / 2018 </div>	
Mailing Address 1133 19th St NW Ste 300		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 22.58 </div>	
City Washington	State DC	Zip Code 20036-3610	Transaction ID : VV0P99HAZK7 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 11 / 08 / 2018 </div>
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept. Monthly		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Klobuchar, Amy, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: <u>MN</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1123.77</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">361.21</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Hubbard, Tshombe, , , [Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee O'Brien Garrett			<input type="checkbox"/> Memo Item		
Mailing Address 1133 19th St NW Ste 300			Date of Public Distribution/Dissemination 08 / 10 / 2018		
City Washington		State DC	Zip Code 20036-3610		
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept. Monthly			Category/Type 004		
Name of Federal Candidate: Smith, Tina, Flint, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: MN		
Calendar Year-To-Date Per Election for Office Sought			1123.77 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee O'Brien Garrett			<input type="checkbox"/> Memo Item		
Mailing Address 1133 19th St NW Ste 300			Date of Public Distribution/Dissemination 08 / 10 / 2018		
City Washington		State DC	Zip Code 20036-3610		
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept. Monthly			Category/Type 004		
Name of Federal Candidate: Baldwin, Tammy, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: WI		
Calendar Year-To-Date Per Election for Office Sought			1275.05 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			1128.76		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶				New report Amends report filed on MM / DD / YYYY							
Full Name of Payee <input type="checkbox"/> Memo Item O'Brien Garrett			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 10 / 2018								
Mailing Address 1133 19th St NW Ste 300			Amount 101.59								
City Washington State DC Zip Code 20036-3610		Transaction ID : VV0P99HAZP1 Date of Disbursement or Obligation MM / DD / YYYY 11 / 08 / 2018									
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept. Monthly			Category/Type 004								
Name of Federal Candidate: Nicholson, Kevin, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: WI								
Calendar Year-To-Date Per Election for Office Sought 1275.05			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____								
Full Name of Payee <input type="checkbox"/> Memo Item O'Brien Garrett			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 10 / 2018								
Mailing Address 1133 19th St NW Ste 300			Amount 146.74								
City Washington State DC Zip Code 20036-3610		Transaction ID : VV0P99HAZQ8 Date of Disbursement or Obligation MM / DD / YYYY 11 / 08 / 2018									
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept. Monthly			Category/Type 004								
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV								
Calendar Year-To-Date Per Election for Office Sought 256121.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____								
<table style="width: 100%;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width: 40%; text-align: right;">▶ 248.33</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;">▶ </td> </tr> <tr> <td>(c) TOTAL Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶ 248.33	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ 	(c) TOTAL Independent Expenditures	▶
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 248.33										
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ 										
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>Hubbard, Tshombe, , ,</u>			Date MM / DD / YYYY 06 / 17 / 2019								

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee O'Brien Garrett			<input type="checkbox"/> Memo Item		
Mailing Address 1133 19th St NW Ste 300			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 10 / 2018		
City Washington		State DC	Zip Code 20036-3610		
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept. Monthly			Category/Type 004		
Name of Federal Candidate: Brown, Sherrod, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Amount 564.38			Transaction ID : VV0P99HAZR6		
Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 08 / 2018					
Full Name of Payee O'Brien Garrett			<input type="checkbox"/> Memo Item		
Mailing Address 1133 19th St NW Ste 300			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 10 / 2018		
City Washington		State DC	Zip Code 20036-3610		
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept. Monthly			Category/Type 004		
Name of Federal Candidate: Casey, Robert, P, , Jr			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Amount 45.15			Transaction ID : VV0P99HAZS4		
Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 08 / 2018					
(a) SUBTOTAL of Itemized Independent Expenditures 609.53					
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item O'Brien Garrett			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Mailing Address 1133 19th St NW Ste 300			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">338.63</div>	
City Washington	State DC	Zip Code 20036-3610	Transaction ID : VV0P99HAZT2 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept. Monthly		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Name of Federal Candidate: McCaskill, Claire, ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">10035.02</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <input type="checkbox"/> Memo Item O'Brien Garrett			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Mailing Address 1133 19th St NW Ste 300			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">553.09</div>	
City Washington	State DC	Zip Code 20036-3610	Transaction ID : VV0P99HAZV0 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept. Monthly		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div>	
Name of Federal Candidate: Tester, Jon, ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1527.01</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;">891.72</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

MM / DD / YYYY

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee O'Brien Garrett			<input type="checkbox"/> Memo Item		
Mailing Address 1133 19th St NW Ste 300			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 08 / 10 / 2018		
City Washington		State DC	Zip Code 20036-3610		
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept. Monthly			Category/Type 004		
Name of Federal Candidate: Rosendale, Matt, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>MT</u>		
Calendar Year-To-Date Per Election for Office Sought 1527.01			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee O'Brien Garrett			<input type="checkbox"/> Memo Item		
Mailing Address 1133 19th St NW Ste 300			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 08 / 10 / 2018		
City Washington		State DC	Zip Code 20036-3610		
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept. Monthly			Category/Type 004		
Name of Federal Candidate: Renacci, James, B., ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought 1440.58			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			395.07		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on	
Full Name of Payee O'Brien Garrett		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">08 / 10 / 2018</div> </div>	
Mailing Address 1133 19th St NW Ste 300		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">146.74</div>	
City Washington	State DC	Zip Code 20036-3610	Transaction ID : VV0P99HAZY1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">11 / 08 / 2018</div> </div>
Purpose of Expenditure Actual Cost and Payment for Direct Mail Printing, Prod. and Postage As Disclosed on Sept. Monthly		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Heller, Dean, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Planned Parenthood Action Fund		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 19 / 2018</div> </div>	
Mailing Address 123 William St Fl 10		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">7337.60</div>	
City New York	State NY	Zip Code 10038-3844	Transaction ID : VV0P99HA3G3 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 18 / 2018</div> </div>
Purpose of Expenditure Digital Advertising Production		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Heller, Dean, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">7484.34</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
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 (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Hubbard, Tshombe, , ,		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">06 / 17 / 2019</div> </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Action Fund			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 123 William St FL 10			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">555.00</div>	
City New York	State NY	Zip Code 10038-3844	Transaction ID : VV0P99HAEW0 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure List Rental		Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Nelson, Bill, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">134897.46</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Planned Parenthood Action Fund			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 123 William St FL 10			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">536.94</div>	
City New York	State NY	Zip Code 10038-3844	Transaction ID : VV0P99HAH71 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure List Rental		Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Nelson, Bill, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">134897.46</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	1091.94
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M /

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Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Ralston Lapp			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">19</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 1054 31st St NW Ste 430			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12261.05</div>	
City Washington	State DC	Zip Code 20007-6042		
Purpose of Expenditure Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HA3H1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Fitzpatrick, Brian, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1852246.19</div>				

Full Name of Payee <input type="checkbox"/> Memo Item Ralston Lapp			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">29</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 1054 31st St NW Ste 430			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12194.28</div>	
City Washington	State DC	Zip Code 20007-6042		
Purpose of Expenditure Digital Advertising Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HAFB9 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Fitzpatrick, Brian, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1852246.19</div>				

(a) SUBTOTAL of Itemized Independent Expenditures	▶	24455.33
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 263 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

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Full Name of Payee Stones' Phones			<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 41750 Rancho Las Palmas Dr # E			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6663.21</div>		
City Rancho Mirage	State CA	Zip Code 92270-5511	Transaction ID : VV0P99HAFZ7 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Actual Cost for Voter Outreach Calls As Disclosed on 10/31 24-Hr Report			Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		
Name of Federal Candidate: Nelson, Bill, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">134897.46</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			2018		

Full Name of Payee Terris, Barnes & Walters			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 400 Montgomery St Ste 700			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">26850.92</div>		
City San Francisco	State CA	Zip Code 94104-1219	Transaction ID : VV0P99HAKT5 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Actual Cost and Payment for Direct Mail Prod., Printing and Postage As Disc. on 10/11 48-Hr Report			Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		
Name of Federal Candidate: Roskam, Peter, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IL</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">422762.16</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			2018		

(a) SUBTOTAL of Itemized Independent Expenditures	▶	26850.92
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 264 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee <input type="checkbox"/> Memo Item Terris, Barnes & Walters		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2018	
Mailing Address 400 Montgomery St Ste 700		Amount 32200.66	
City San Francisco	State CA	Zip Code 94104-1219	Transaction ID : VV0P99HAEX8
Purpose of Expenditure Actual Cost for Mail Piece Production, Printing and Postage As Disclosed on 10/26 24-Hr Report		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 06 / 2018
Name of Federal Candidate: Faso, John, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 439996.14		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Terris, Barnes & Walters		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2018	
Mailing Address 400 Montgomery St Ste 700		Amount 32200.66	
City San Francisco	State CA	Zip Code 94104-1219	Transaction ID : VV0P99HAEY6
Purpose of Expenditure Actual Cost for Mail Piece Production, Printing and Postage As Disclosed on 10/26 24-Hr Report		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 06 / 2018
Name of Federal Candidate: Roskam, Peter, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL
Calendar Year-To-Date Per Election for Office Sought 422762.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		64401.32	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Hubbard, Tshombe, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 265 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on	
Full Name of Payee Terris, Barnes & Walters		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2018	
Mailing Address 400 Montgomery St Ste 700		Amount 32200.66	
City San Francisco	State CA	Zip Code 94104-1219	Transaction ID : VV0P99HAF85
Purpose of Expenditure Actual Cost for Mail Piece Production, Printing and Postage As Disclosed on 10/30 24-Hr Report		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 11 / 06 / 2018
Name of Federal Candidate: Faso, John, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Terris, Barnes & Walters		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 30 / 2018	
Mailing Address 400 Montgomery St Ste 700		Amount 16548.67	
City San Francisco	State CA	Zip Code 94104-1219	Transaction ID : VV0P99HAFV5
Purpose of Expenditure Actual Cost for Mail Piece Production, Printing and Postage As Disclosed on 10/31 24-Hr Report		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 06 / 2018
Name of Federal Candidate: Casten, Sean, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IL</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		48749.33	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Hubbard, Tshombe, , ,		Date MM / DD / YYYY 06 / 17 / 2019	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 266 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

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Full Name of Payee <input type="checkbox"/> Memo Item Terris, Barnes & Walters			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">30</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 400 Montgomery St Ste 700			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 16548.67 </div>	
City San Francisco	State CA	Zip Code 94104-1219		
Purpose of Expenditure Actual Cost for Mail Piece Production, Printing and Postage As Disclosed on 10/31 24-Hr Report		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Transaction ID : VV0P99HAFW3 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Roskam, Peter, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IL</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 422762.16 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Terris, Barnes & Walters			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address 400 Montgomery St Ste 700			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 16548.67 </div>	
City San Francisco	State CA	Zip Code 94104-1219		
Purpose of Expenditure Actual Cost for Mail Piece Production, Printing and Postage As Disclosed on 11/1 24-Hr Report		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Transaction ID : VV0P99HAG86 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Name of Federal Candidate: Delgado, Antonio, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 439996.14 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	33097.34
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 267 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Terris, Barnes & Walters <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2018	
Mailing Address 400 Montgomery St Ste 700		Amount 16548.67	
City San Francisco	State CA	Zip Code 94104-1219	Transaction ID : VV0P99HAG94
Purpose of Expenditure Actual Cost for Mail Piece Production, Printing and Postage As Disclosed on 11/1 24-Hr Report		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 06 / 2018
Name of Federal Candidate: Faso, John, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 439996.14		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee The Pivot Group <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2018	
Mailing Address 1015 15th St NW Ste 600		Amount 59224.77	
City Washington	State DC	Zip Code 20005-2605	Transaction ID : VV0P99HA380
Purpose of Expenditure Mail Piece Production, Printing and Postage		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2018
Name of Federal Candidate: McSally, Martha, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought 1417622.11		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		75773.44	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Hubbard, Tshombe, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 268 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee The Pivot Group <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 22 / 2018		
Mailing Address 1015 15th St NW Ste 600			Amount 29612.39		
City Washington	State DC	Zip Code 20005-2605	Transaction ID : VV0P99HA3S2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2018		
Purpose of Expenditure Mail Piece Production, Printing and Postage		Category/ Type 004			
Name of Federal Candidate: McSally, Martha, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>		
Calendar Year-To-Date Per Election for Office Sought		1417622.11	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee The Pivot Group <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 22 / 2018		
Mailing Address 1015 15th St NW Ste 600			Amount 29612.38		
City Washington	State DC	Zip Code 20005-2605	Transaction ID : VV0P99HA3T0 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2018		
Purpose of Expenditure Mail Piece Production, Printing and Postage		Category/ Type 004			
Name of Federal Candidate: Sinema, Kyrsten, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>		
Calendar Year-To-Date Per Election for Office Sought		1417622.11	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			59224.77		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee The Pivot Group <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2018		
Mailing Address 1015 15th St NW Ste 600			Amount 2270.00		
City Washington	State DC	Zip Code 20005-2605	Transaction ID : VV0P99HB014 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2018		
Purpose of Expenditure Direct Mail Piece Production, Printing and Postage		Category/ Type 004			
Name of Federal Candidate: Sinema, Kyrsten, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>		
Calendar Year-To-Date Per Election for Office Sought		1417622.11	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee The Pivot Group <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2018		
Mailing Address 1015 15th St NW Ste 600			Amount 2270.00		
City Washington	State DC	Zip Code 20005-2605	Transaction ID : VV0P99HB022 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2018		
Purpose of Expenditure Direct Mail Piece Production, Printing and Postage		Category/ Type 004			
Name of Federal Candidate: McSally, Martha, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>		
Calendar Year-To-Date Per Election for Office Sought		1417622.11	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			4540.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 271 OF 283
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00489799 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item The Pivot Group <small>*</small>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-around;"> 10 24 2018 </div>	
Mailing Address 1015 15th St NW Ste 600			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 9870.80 </div>	
City Washington	State DC	Zip Code 20005-2605		
Purpose of Expenditure Mail Piece Production, Printing and Postage		Category/Type 004	Transaction ID : VV0P99HADN2 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div>	
Name of Federal Candidate: Sinema, Kyrsten, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>	
Calendar Year-To-Date Per Election for Office Sought 1417622.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item The Pivot Group <small>*</small>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-around;"> 10 24 2018 </div>	
Mailing Address 1015 15th St NW Ste 600			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 9870.79 </div>	
City Washington	State DC	Zip Code 20005-2605		
Purpose of Expenditure Mail Piece Production, Printing and Postage		Category/Type 004	Transaction ID : VV0P99HAE33 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div>	
Name of Federal Candidate: McSally, Martha, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>	
Calendar Year-To-Date Per Election for Office Sought 1417622.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 0.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

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17
2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y

Full Name of Payee The Pivot Group			<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>10</div> <div>24</div> <div>2018</div> </div>	
Mailing Address 1015 15th St NW Ste 600			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9870.79</div>		
City Washington	State DC	Zip Code 20005-2605			
Purpose of Expenditure Mail Piece Production, Printing and Postage			Category/ Type	<div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: Kirkpatrick, Ann, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">23930.77</div>		

Full Name of Payee The Pivot Group			<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div>10</div> <div>24</div> <div>2018</div> </div>	
Mailing Address 1015 15th St NW Ste 600			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9870.79</div>		
City Washington	State DC	Zip Code 20005-2605			
Purpose of Expenditure Mail Piece Production, Printing and Postage			Category/ Type	<div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: Marquez Peterson, Lea, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">23930.77</div>		

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

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Date

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2019

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on M M / D D / Y Y Y Y Y Y											
Full Name of Payee <input type="checkbox"/> Memo Item The Pivot Group				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 26 / 2018							
Mailing Address 1015 15th St NW Ste 600				Amount 34022.29							
City Washington		State DC		Zip Code 20005-2605							
Purpose of Expenditure Mail Piece Production, Printing and Postage				Category/Type 004							
Name of Federal Candidate: Sinema, Kyrsten, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>AZ</u>							
Calendar Year-To-Date Per Election for Office Sought 1417622.11				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____							
Full Name of Payee <input type="checkbox"/> Memo Item The Pivot Group				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 24 / 2018							
Mailing Address 1015 15th St NW Ste 600				Amount 34022.29							
City Washington		State DC		Zip Code 20005-2605							
Purpose of Expenditure Mail Piece Production, Printing and Postage				Category/Type 004							
Name of Federal Candidate: Sinema, Kyrsten, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>AZ</u>							
Calendar Year-To-Date Per Election for Office Sought 1417622.11				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width:40%; text-align: right;">68044.58</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;"> </td> </tr> <tr> <td>(c) TOTAL Independent Expenditures</td> <td style="text-align: right;"> </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	68044.58	(b) SUBTOTAL of Unitemized Independent Expenditures.....	 	(c) TOTAL Independent Expenditures	
(a) SUBTOTAL of Itemized Independent Expenditures	68044.58										
(b) SUBTOTAL of Unitemized Independent Expenditures.....	 										
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>Hubbard, Tshombe, , ,</u>				Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019							

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee The Pivot Group <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2018		
Mailing Address 1015 15th St NW Ste 600			Amount 49302.21		
City Washington	State DC	Zip Code 20005-2605	Transaction ID : VV0P99HAGA2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 30 / 2018		
Purpose of Expenditure Mail Piece Production, Printing and Postage		Category/ Type 004			
Name of Federal Candidate: Heller, Dean, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought		256121.72	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee The Pivot Group <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2018		
Mailing Address 1015 15th St NW Ste 600			Amount 49302.21		
City Washington	State DC	Zip Code 20005-2605	Transaction ID : VV0P99HAJ82 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 30 / 2018		
Purpose of Expenditure Mail Piece Production, Printing and Postage		Category/ Type 004			
Name of Federal Candidate: Heller, Dean, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought		256121.72	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			98604.42		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶				New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item The Pivot Group *			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 31 / 2018 </div>		
Mailing Address 1015 15th St NW Ste 600			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 26687.50 </div>		
City Washington	State DC	Zip Code 20005-2605	Transaction ID : VV0P99HAGC8 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>		
Purpose of Expenditure Mail Piece Production, Printing and Postage		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose McSally, Martha, , ,		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1417622.11</div>		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____			Full Name of Payee <input checked="" type="checkbox"/> Memo Item The Pivot Group *		
Mailing Address 1015 15th St NW Ste 600			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 31 / 2018 </div>		
City Washington	State DC	Zip Code 20005-2605	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 26687.50 </div>		
Purpose of Expenditure Mail Piece Production, Printing and Postage		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : VV0P99HAGD5 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Sinema, Kyrsten, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1417622.11</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,
[Electronically Filed]

Signature _____ Date

M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee Twitter * <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1355 Market St Ste 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">333.33</div>	
City San Francisco	State CA	Zip Code 94103-1337	Transaction ID : VV0P99HAH89 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising		Category/Type 004	Name of Federal Candidate: Hawley, Joshua, David, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose 	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Twitter * <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1355 Market St Ste 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">333.33</div>	
City San Francisco	State CA	Zip Code 94103-1337	Transaction ID : VV0P99HAH97 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising		Category/Type 004	Name of Federal Candidate: Heller, Dean, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose 	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

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M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Twitter *				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="width: 15%;">11</div> <div style="width: 15%;">01</div> <div style="width: 70%;">2018</div> </div>	
Mailing Address 1355 Market St Ste 900				Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">333.33</div>	
City San Francisco		State CA		Zip Code 94103-1337	
Purpose of Expenditure Digital Advertising				Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: McSally, Martha, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">1417622.11</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Twitter *				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="width: 15%;">11</div> <div style="width: 15%;">01</div> <div style="width: 70%;">2018</div> </div>	
Mailing Address 1355 Market St Ste 900				Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">333.33</div>	
City San Francisco		State CA		Zip Code 94103-1337	
Purpose of Expenditure Digital Advertising				Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: Scott, Rick, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">134897.46</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div> </div> </div>					
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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u> [Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="width: 15%;">06</div> <div style="width: 15%;">17</div> <div style="width: 70%;">2019</div> </div>	

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Twitter *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2018
Mailing Address 1355 Market St Ste 900			Amount 62.50		Transaction ID : VV0P99HAZ64 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City San Francisco State CA Zip Code 94103-1337					
Purpose of Expenditure Digital Advertising		Category/Type 004			
Name of Federal Candidate: McSally, Martha, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: AZ
Calendar Year-To-Date Per Election for Office Sought 1417622.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Twitter *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2018
Mailing Address 1355 Market St Ste 900			Amount 62.50		Transaction ID : VV0P99HAZ72 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City San Francisco State CA Zip Code 94103-1337					
Purpose of Expenditure Digital Advertising		Category/Type 004			
Name of Federal Candidate: Scott, Rick, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: FL
Calendar Year-To-Date Per Election for Office Sought 134897.46			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Hubbard, Tshombe, , ,</i>			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
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Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report	New report	Amends report filed on MM / DD / YYYY
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Full Name of Payee <input checked="" type="checkbox"/> Memo Item Twitter			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 04 / 2018	
Mailing Address 1355 Market St Ste 900			Amount 62.50	
City San Francisco	State CA	Zip Code 94103-1337	Transaction ID : VV0P99HAZ80 Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure Digital Advertising		Category/ Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Heller, Dean, , ,	
Calendar Year-To-Date Per Election for Office Sought 256121.72		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: NV <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶				

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Twitter			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 04 / 2018	
Mailing Address 1355 Market St Ste 900			Amount 62.50	
City San Francisco	State CA	Zip Code 94103-1337	Transaction ID : VV0P99HAZ98 Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure Digital Advertising		Category/ Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Hawley, Joshua, David, ,	
Calendar Year-To-Date Per Election for Office Sought 10035.02			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: MO <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MO	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶				

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

MM / DD / YYYY
 06 / 17 / 2019

Signature

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Twitter *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2018
Mailing Address 1355 Market St Ste 900			Amount 62.50		Transaction ID : VV0P99HAZA6 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City San Francisco		State CA			
Purpose of Expenditure Digital Advertising			Category/ Type 004		
Name of Federal Candidate: Paulsen, Erik, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought			201628.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Waterfront Strategies			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2018
Mailing Address 3050 K St NW Ste 100			Amount 66022.80		Transaction ID : VV0P99HA3C1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2018
City Washington		State DC			
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 10/19 24-hr Report			Category/ Type 004		
Name of Federal Candidate: Roskam, Peter, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL
Calendar Year-To-Date Per Election for Office Sought			422762.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures					66022.80
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Hubbard, Tshombe, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item Waterfront Strategies				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2018	
Mailing Address 3050 K St NW Ste 100				Amount 311550.00	
City Washington		State DC	Zip Code 20007-5161	Transaction ID : VV0P99HA3D9 Date of Disbursement or Obligation MM / DD / YYYY 10 / 18 / 2018	
Purpose of Expenditure Digital Advertising Production and Buy			Category/ Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Fitzpatrick, Brian, , ,				Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought 1852246.19				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Waterfront Strategies				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2018	
Mailing Address 3050 K St NW Ste 100				Amount 730050.00	
City Washington		State DC	Zip Code 20007-5161	Transaction ID : VV0P99HAD48 Date of Disbursement or Obligation MM / DD / YYYY 10 / 22 / 2018	
Purpose of Expenditure Digital Advertising Buy			Category/ Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Fitzpatrick, Brian, , ,				Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought 1852246.19				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				1041600.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hubbard, Tshombe, , ,</u>				Date MM / DD / YYYY 06 / 17 / 2019	

[Electronically Filed]

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Waterfront Strategies			<input type="checkbox"/> Memo Item		
Mailing Address 3050 K St NW Ste 100			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2018		
City Washington		State DC	Zip Code 20007-5161		
Purpose of Expenditure Actual Cost for Digital Advertising Production and Buy As Disclosed on 11/2 24-Hr Report			Amount 184786.96		
Category/Type 004			Transaction ID : VV0P99HAHD8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 23 / 2018		
Name of Federal Candidate: Roskam, Peter, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IL</u>		
Calendar Year-To-Date Per Election for Office Sought 422762.16			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Waterfront Strategies			<input type="checkbox"/> Memo Item		
Mailing Address 3050 K St NW Ste 100			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2018		
City Washington		State DC	Zip Code 20007-5161		
Purpose of Expenditure Actual Cost for Digital Advertising Buy As Disclosed on 10/30 24-Hr Report			Amount 734700.00		
Category/Type 004			Transaction ID : VV0P99HAFA1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2018		
Name of Federal Candidate: Fitzpatrick, Brian, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>		
Calendar Year-To-Date Per Election for Office Sought 1852246.19			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			919486.96		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) 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 (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Hubbard, Tshombe, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 06 / 17 / 2019	

