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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

(a) Name of Individual, Organization or Corporation PLANNED PARENTHOOD ADVOCATES OF WISCONSIN INC		
(b) Address (number and street) check if different than previously reported 10 E DOTY ST, SUITE 205		
(c) City, State and ZIP Code		3. FEC Identification Number
MADISON	WI 53703	3. FEG Identification Number
O O O O O O O O O O O O O O O O O O O	out Out A	C C90008673
Occupation and Name of Employer (for Individual File	ers Only)	
5. COVERING PERIOD: FROM 0	24-Hour Report 48-Hour Report No Yes, it amends the report filed on 7 01 2017	M M / D D / Y Y Y Y
TOTAL CONTRIBUTIONS TOTAL INDEPENDENT EXPENDITURES	L	.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.		
TYPE OR PRINT NAME OF PERSON COMPLETING F	[I	DATE Electronically Filed]
Barnes, Mel, , ,	Barnes, Mel, , ,	01/30/2018
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.		

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' + H9 A = N5 H+ CB

Form/Schedule: F5N Transaction ID:

No reportable IEs made or contributions received during this 6 month period.

Form/Schedule: Transaction ID: