

# 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**

MI Planned Parenthood Votes

ADDRESS (number and street) **PO Box 15041**

Check if different than previously reported. (ACC) **Lansing MI 48901**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

**C** C00568931

3. IS THIS REPORT NEW (N) OR AMENDED (A)  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 **MM / DD / YYYY** in the State of **MI**

- (d) 30-Day POST-Election Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on **MM / DD / YYYY** in the State of **MI**

5. Covering Period **MM / DD / YYYY** through **MM / DD / YYYY**

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

Keserich, John, Thomas, ,

Type or Print Name of Treasurer

Signature of Treasurer *Keserich, John, Thomas, ,* [Electronically Filed] Date **MM / DD / YYYY**

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									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**MI Planned Parenthood Votes**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		2101.72
(b) Cash on Hand at Beginning of Reporting Period.....	141520.88	
(c) Total Receipts (from Line 19) .....	193484.29	1680935.03
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	335005.17	1683036.75
7. Total Disbursements (from Line 31).....	185839.51	1533871.09
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	149165.66	149165.66
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**MI Planned Parenthood Votes**

Report Covering the Period: From:  /  /  To:  /  /

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).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	193484.29	1680935.03
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	193484.29	1680935.03
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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)).....▶	193484.29	1680935.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	193484.29	1680935.03

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	14009.29	45210.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	14009.29	45210.03
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	167321.10	1484151.94
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	0.00
(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	0.00
29. Other Disbursements (Including Non-Federal Donations).....	4509.12	4509.12
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)) ..	185839.51	1533871.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	185839.51	1533871.09

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	193484.29	1680935.03
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	193484.29	1680935.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	14009.29	45210.03
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	14009.29	45210.03

**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)	PAGE 6 OF 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**MI Planned Parenthood Votes**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. AMERICA VOTES ACTION FUND**

Mailing Address 1155 CONNECTICUT AVE NW  
STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00492520

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
179475.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2020

**Transaction ID : SA11C.4408**

Amount of Each Receipt this Period  
179475.00

Memo Item  
Contribution Mail

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PLANNED PARENTHOOD ADVOCATES OF MICHIGAN**

Mailing Address PO BOX 19104

City LANSING State MI Zip Code 48901

FEC ID number of contributing federal political committee. **C** C90006685

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
26545.88

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 23 / 2020

**Transaction ID : SA11C.4410**

Amount of Each Receipt this Period  
13272.94

Memo Item  
In-kind - Staff Time

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. PLANNED PARENTHOOD VOTES**

Mailing Address 123 WILLIAM ST.

City NEW YORK State NY Zip Code 10038

FEC ID number of contributing federal political committee. **C** C00489799

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1074700.69

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2020

**Transaction ID : SA11C.4412**

Amount of Each Receipt this Period  
522.89

Memo Item  
In-kind - Staff Time

<b>SUBTOTAL</b> of Receipts This Page (optional).....	193270.83
<b>TOTAL</b> 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)	PAGE 7 OF 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MI Planned Parenthood Votes**

**A. PLANNED PARENTHOOD VOTES**

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

Mailing Address 123 WILLIAM ST.

City NEW YORK	State NY	Zip Code 10038
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00489799

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1074914.15

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		03		2020

**Transaction ID : SA11C.4414**

Amount of Each Receipt this Period  

213.46
--------

Memo Item  
In-kind - Staff Time

**B.**

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

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
-----	---	-----	---	---------

Amount of Each Receipt this Period  

--

Memo Item

**C.**

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

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
-----	---	-----	---	---------

Amount of Each Receipt this Period  

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Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	213.46
<b>TOTAL</b> This Period (last page this line number only).....▶	193484.29

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<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)

**MI Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. PLANNED PARENTHOOD ADVOCATES OF MICHIGAN**

Date of Disbursement

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

Mailing Address PO BOX 19104

FEC Identification Number

**C** C90006685

**Transaction ID : SB21B.4411**

Amount of Each Disbursement this Period

13272.94

Memo Item

City  
LANSING

State  
MI

Zip Code  
48901

Purpose of Disbursement  
In-kind - Staff Time

Category/Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. PLANNED PARENTHOOD VOTES**

Date of Disbursement

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

Mailing Address 123 WILLIAM ST.

FEC Identification Number

**C** C00489799

**Transaction ID : SB21B.4413**

Amount of Each Disbursement this Period

522.89

Memo Item

City  
NEW YORK

State  
NY

Zip Code  
10038

Purpose of Disbursement  
In-kind - Staff Time

Category/Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. PLANNED PARENTHOOD VOTES**

Date of Disbursement

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

Mailing Address 123 WILLIAM ST.

FEC Identification Number

**C** C00489799

**Transaction ID : SB21B.4415**

Amount of Each Disbursement this Period

213.46

Memo Item

City  
NEW YORK

State  
NY

Zip Code  
10038

Purpose of Disbursement  
In-kind - Staff Time

Category/Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

14009.29

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

14009.29



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<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)  
**MI Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. The New Media Firm**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2020

Mailing Address 1730 Rhode Island NW  
Suite 213

FEC Identification Number

**C** [ ]  
**Transaction ID : SB29.4416**  
Amount of Each Disbursement this Period  
[ ] 4509.12

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Post Election Digital

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
[ ]		[ ]		[ ]

Mailing Address

FEC Identification Number

**C** [ ]  
Amount of Each Disbursement this Period  
[ ]

City State Zip Code

Purpose of Disbursement

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
[ ]		[ ]		[ ]

Mailing Address

FEC Identification Number

**C** [ ]  
Amount of Each Disbursement this Period  
[ ]

City State Zip Code

Purpose of Disbursement

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

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

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

4509.12
4509.12

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MI Planned Parenthood Votes
FEC IDENTIFICATION NUMBER C C00568931

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Community Outreach Group
Mailing Address 1110 Vermont Ave. NW Suite 300
City Washington State DC Zip Code 20005
Purpose of Expenditure Direct Voter Contact - Canvass Category/Type 004
Date of Public Distribution/Dissemination 10/21/2020
Amount 20000.00
Transaction ID: SE.4352
Date of Disbursement or Obligation 10/21/2020

Name of Federal Candidate: HOADLEY, JON, , ,
Support Oppose
Office Sought: House District: 06
President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 65670.11
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee The Pivot Group
Mailing Address 1100 15th St. NW 4th Floor
City Washington State DC Zip Code 20036
Purpose of Expenditure Mailer Category/Type 004
Date of Public Distribution/Dissemination 10/26/2020
Amount 73660.55
Transaction ID: SE.4402
Date of Disbursement or Obligation 10/15/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,
Support Oppose
Office Sought: House District:
President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 525823.59
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 93660.55
(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.

Keserich, John, Thomas, ,
Signature

[Electronically Filed]

Date 04/22/2021

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MI Planned Parenthood Votes
FEC IDENTIFICATION NUMBER C C00568931

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee The Pivot Group
Mailing Address 1100 15th St. NW 4th Floor
City Washington State DC Zip Code 20036
Purpose of Expenditure Mailer Category/Type 004
Date of Public Distribution/Dissemination 10/26/2020
Amount 73660.55
Transaction ID: SE.4404
Date of Disbursement or Obligation 10/15/2020

Name of Federal Candidate: PETERS, GARY, ,
Support Oppose
Office Sought: House Senate MI
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 73660.55, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 167321.10

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.

Keserich, John, Thomas, , [Electronically Filed] Date 04/22/2021
Signature