

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
Protecting Choice in California, a project of Planned Parenthood Affiliates of California

ADDRESS (number and street) 555 Capitol Mall, Suite 400
Check if different than previously reported. (ACC) Sacramento CA 95814

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00556860
3. IS THIS REPORT NEW OR AMENDED
[x] (N) [] (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[] April 15 Quarterly Report (Q1)
[] July 15 Quarterly Report (Q2)
[x] 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

5. Covering Period 07 / 01 / 2022 through 09 / 30 / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Ragsac, Nikki, ,
Type or Print Name of Treasurer

Signature of Treasurer Ragsac, Nikki, , [Electronically Filed] Date 10 / 13 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

Protecting Choice in California, a project of Planned Parenthood Affiliates of California

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="2022"/>		126784.15
(b) Cash on Hand at Beginning of Reporting Period.....	154457.49	
(c) Total Receipts (from Line 19)	37500.00	144250.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	191957.49	271034.15
7. Total Disbursements (from Line 31).....	15304.77	94381.43
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	176652.72	176652.72
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)	569.15	

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

Write or Type Committee Name

Protecting Choice in California, a project of Planned Parenthood Affiliates of California

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).....	4500.00	4500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4500.00	4500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	33000.00	129250.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	37500.00	133750.00
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	10500.00
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)).....▶	37500.00	144250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	37500.00	144250.00

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	3304.77	3304.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3304.77	3304.77
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)	0.00	76.66
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	21000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	21000.00
29. Other Disbursements (Including Non-Federal Donations).....	12000.00	70000.00
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)) ..	15304.77	94381.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15304.77	94381.43

DETAILED SUMMARY PAGE
of Disbursements

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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)	37500.00	133750.00
34. Total Contribution Refunds (from Line 28(d))	0.00	21000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37500.00	112750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3304.77	3304.77
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3304.77	3304.77

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : IA1341

Contribution received in error. See refund on Schedule B

Form/Schedule:

Transaction ID:

**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 8 OF 13
<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)
Protecting Choice in California, a project of Planned Parenthood Affiliates of California

A. Planned Parenthood Action Fund of the Pacific Southwest PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1075 El Camino del Rio South

City San Diego	State CA	Zip Code 92108
-------------------	-------------	-------------------

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 ▼
24125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		04		2022

Transaction ID : IA1342

Amount of Each Receipt this Period
7500.00

Memo Item

B. Planned Parenthood Advocacy Project Los Angeles County Action Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 555 Capitol Mall, Suite 400

City Sacramento	State CA	Zip Code 95814
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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 ▼
21625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		03		2022

Transaction ID : IA1339

Amount of Each Receipt this Period
6750.00

Memo Item

C. Planned Parenthood Advocates Pasadena and San Gabriel Valley PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 555 Capitol Mall, Suite 400

City Sacramento	State CA	Zip Code 95814
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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 ▼
1875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2022

Transaction ID : IA1336

Amount of Each Receipt this Period
1875.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	16125.00
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)	PAGE 9 OF 13
<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)
Protecting Choice in California, a project of Planned Parenthood Affiliates of California

A. Planned Parenthood Central Coast Action Fund PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 518 Garden Street

City Santa Barbara	State CA	Zip Code 93101
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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 ▼
4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2022

Transaction ID : IA1347

Amount of Each Receipt this Period
1500.00

Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 555 Capitol Mall, Suite 400

City Sacramento	State CA	Zip Code 95814
--------------------	-------------	-------------------

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 ▼
20000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2022

Transaction ID : IA1335

Amount of Each Receipt this Period
6000.00

Memo Item

C. We Vote - Nosotros Votamos - PPAMM

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 400 Capitol Mall, Suite 1545

City Sacramento	State CA	Zip Code 95814
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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 ▼
32125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2022

Transaction ID : IA1337

Amount of Each Receipt this Period
9375.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	16875.00
TOTAL This Period (last page this line number only).....▶	33000.00

**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)

Protecting Choice in California, a project of Planned Parenthood Affiliates of California

Full Name (Last, First, Middle Initial)

A. Financial Innovations, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		19		2022

Mailing Address 1 Weingeroff Blvd.

FEC Identification Number

C [REDACTED]

Transaction ID : EB1333
Amount of Each Disbursement this Period

[REDACTED] 1624.62

Memo Item

City Cranston State RI Zip Code 02910

Purpose of Disbursement T-Shirts 006 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 Affiliates of California

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		20		2022

Mailing Address 1201 K Street, Suite 710

FEC Identification Number

C [REDACTED]

Transaction ID : EB1334
Amount of Each Disbursement this Period

[REDACTED] 238.46

Memo Item

City Sacramento State CA Zip Code 95814

Purpose of Disbursement Staff Time for Non-Federal Activity 001 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 Affiliates of California

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		04		2022

Mailing Address 1201 K Street, Suite 710

FEC Identification Number

C [REDACTED]

Transaction ID : EB1340
Amount of Each Disbursement this Period

[REDACTED] 1021.19

Memo Item

City Sacramento State CA Zip Code 95814

Purpose of Disbursement Staff Time for Non Federal Activity 001 Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

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

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

[REDACTED] 2884.27

[REDACTED]

**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)

Protecting Choice in California, a project of Planned Parenthood Affiliates of California

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Affiliates of California

Mailing Address 1201 K Street, Suite 710

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
Staff Time for Non-Federal Activity

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2022

FEC Identification Number

C

Transaction ID : EB1346

Amount of Each Disbursement this Period

420.50

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

420.50

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

3304.77

**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)

Protecting Choice in California, a project of Planned Parenthood Affiliates of California

Full Name (Last, First, Middle Initial)

A. Cohen for Controller 2022, Malia

Mailing Address 248 3rd Street #437

City Oakland State CA Zip Code 94607

Purpose of Disbursement
Contribution to Non-Federal Committee

Category/
Type

Candidate Name
Cohen for Controller 2022, Malia

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EB1350
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Equality California Political Action Committee

Mailing Address 515 South Figueroa Street, Suite 1

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Contribution to Non-Federal Committee

Category/
Type

Candidate Name
Equality California Political Action Committee

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EB1338
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Northern California Action Fund

Mailing Address P.O. Box 1116

City Concord State CA Zip Code 94522

Purpose of Disbursement
Refund of contribution received in error

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EB1348
Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 13
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Protecting Choice in California, a project of Planned Parenthood Affiliates of California

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Planned Parenthood Affiliates of California			Nature of Debt (Purpose): Staff Time for Non-Federal Activity
Mailing Address 1201 K Street, Suite 710			
City Sacramento	State CA	Zip Code 95814	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : PD1359		
Amount Incurred This Period <input type="text" value="569.15"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="569.15"/>	

B. 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 <input type="text"/>	Transaction ID :		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	

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 <input type="text"/>	Transaction ID :		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="569.15"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="569.15"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="569.15"/>