

RECEIVED

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FEG MAIL GENTER

May 3, 2013

Federal Election Commission 999 E Street, N.W. Washington, DC 20463

Attention: Christopher Whyrick, Senior Campaign Finance Anaylst

Re: Identification Number C90008236

Reference: Year-End Report (10/01/2012 - 12/31/2012

Dear Mr. Whyrick:

Attached is an amended FEC Form 5 (year-end report) providing the corrected total amount of contributions for the period from October 1, 2012 through December 31. All independent expenditures reported on the Form 5 were made from the general treasury funds of the Planned Parenthood Hudson Peconic Action Fund.

Sincerely,

Li**s**a B. Winjum

Vice President, Public Affairs

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECE To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations MAY -8 1. (a) Name of Individual, Organization or Corporation FEC MAIL GENTER (b) Address (number and street) Check if different than previously reported 3. FEC Identification Number C90008231 Corporate filers only ☐ Yes ☐ No Is the filer a qualified nonprofit corporation? Individual filers only Name of Employer Occupation 4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report July 15 Quarterly Report 24-Hour Report October 15 Quarterly Report anuary 31 Year-End Report 48-Hour Report b) Is this Report an amendment? 5. COVERING PERIOD: FROM 6. TOTAL CONTRIBUTIONS 7. 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 any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Lisa B. Winjum

NOTE: Submission of false, erroneous or incomplete information may subject tile person signing this report to the penalties of 2 U.S.C. §437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-A ITEMIZED RECEIPTS

| PAGE 2 0F4

	and Statements may not be sold or used by any peing the name and address of any political committees	
Planned Parenthood	d-Hudson Reconic Action	Fund
A. Full Name (Last, First, Middle Initial)		
Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	inere memore en mande en en mande en m C	Canadian process and a company of the company of th
Name of Employer	Occupation	
B. Full Name (Last, First, Middle Initial)		Date of Bassist
Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	. <u>I </u>
C. Full Name (Last, First, Middle Initial)		·
		Date of Receipt
Mailing Address		
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupatio	1
D. Full Name (Last, First, Middle Initial)		Date of Bessint
Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		
Name of Employer	Occupatio	n
SUBTOTAL of Receipts This Page (opti	onal)	and the second s
	Il to Line 6)	8.15.5.38

	CHEDULE 5-E EMIZIO INDEPENDENT EXPENDITURES	PAGE 3 OF 4 FOR LINE 7 OF FORM 5			
N	AME OF FILER (In Full)				
Planned Parenthood Hudson Peronic Action Fund					
<u></u>	Full lame (Last, First, Middle Initial) of Payee	Date			
	Mack Crounse Group	10 22 2012			
	2001 N. Beauregard Street, Ste. 420	Amount			
	Alexandria, VA 22311				
	Purpose of Expenditure Category/	Office Sought: House State: 1			
	1 1 1 2	Senate District: 18			
	Name of Federal Candidate Supported or Opposed by Expenditure;	President			
	Nan Hayworth	Check One: Support Oppose			
•	Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)			
	Full Name (Last, First, Middle Initial) of Payee	Date			
	Mack Crownse Group	10 25 2012			
•	2001 N. Beauregard Street, Ste. 420 City State Zip Code	Amount :			
		U 4 6 2 7 21			
	Alexandria, VA 22311	44.8374			
	Purpose of Expenditure Mailer Category/ Type Oc.6	Office Sought: X House State: VY Senate District: 1			
	Name of Federal Candidate Supported or Opposed by Expenditure: Randy Altschuler	Check One: Support Oppose			
	Calendar Year-To-Date Per Election for Office Sought	Disbursement For. Primary General Other (specify)			
	Full Name (Last, First, Middle Initial) of Payee	Date			
	Mack Crounse Group Malling Address	10'25'2012			
	2001 N. Beauregard Street, Ste. 420	Amount			
	City State Zip Code Alexandría, VA 22311	4.3.2.8.51			
	Purpose of Expenditure Category/	Office Sought: House State: NY			
	Mailer Type 0.0.6	· · · · · · · · · · · · · · · · · · ·			
	Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District 17			
	Joe Carvin	Check One: Support Doppose			
	Colordor Veer To Date Boy Classics	Disbursement For. Primary General			
	for Office Sought	Other (specify)			
	(a) SUBTOTAL of Itemized Independent Expenditures	· 1.3.214.9.7			
	(b) SUBTOTAL of Uniternized Independent Expenditures	0			
	(c) TOTAL Independent Expenditures	· 1.7.6.6.7.6.9			

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES	PAGE 4 OF 4 FOR LINE 7 OF FORM 5
NAME OF FILER (In Full)	1, 61, 21, 21, 61, 101, 111, 111
Planned Grenthood Hudson Pecanic A	ction Fund
Full lame (Last, First, Middle Initial) of Payee	Date
Mack Crownse Group	11 01 2012
2001 N. Beaureg and Street, Ste. 42 City State Zip Code	6 Amount
Alexandria, VA 22311	445272
Purpose of Expenditure Category/ Type Co.0.6	Office Sought: X House State: VY
Mailer Type 0.0.6	Senate District: 18
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Sean Malonen	Check One: X Support Dppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶
Full Name (Lest, First, Middle Initial) of Payee	Date
Melling Address	
	Amount
City State Zip Code	
Purpose of Expenditure Category/	Office Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District:
Rathe of Federal Calculate Supported of Opposed by Experiments.	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For. Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	- Autonit
, cas	
Purpose of Expenditure Category/ Type	Office Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	4.4.5.2.7.2
(b) SUBTOTAL of Uniternized Independent Expenditures	· >
(c) TOTAL Independent Expenditures(carry total from last page forward to Line 7)	. 1.7.6.6.7.6.9

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation[™] or Signature Confirmation[™] Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

DATE PREPARED

(3/2005)