

**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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y 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 M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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 M /

D D D /

Y Y Y Y Y Y Y

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  
12 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2017</span>		<span style="border: 1px solid black; padding: 2px;">773662.57</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">1011503.13</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">155600.00</span>	<span style="border: 1px solid black; padding: 2px;">3801094.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">1167103.13</span>	<span style="border: 1px solid black; padding: 2px;">4574756.57</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">32658.02</span>	<span style="border: 1px solid black; padding: 2px;">3440311.46</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">1134445.11</span>	<span style="border: 1px solid black; padding: 2px;">1134445.11</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">40153.85</span>	



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 Y Y
12		01		2017

To:

M M	/	D D	/	Y Y Y Y Y Y
12		31		2017

**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).....

155500.00

3800894.00

(ii) Unitemized .....

100.00

200.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

155600.00

3801094.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

155600.00

3801094.00

## 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

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)) .....

155600.00

3801094.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

155600.00

3801094.00

# **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 .....	22353.94	1351038.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	22353.94	1351038.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2000.00
24. Independent Expenditures (use Schedule E) .....	0.00	127812.26
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).....	10304.08	1959461.06
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)) ..	32658.02	3440311.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32658.02	3440311.46

**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) .....	155600.00	3801094.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	155600.00	3801094.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	22353.94	1351038.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	22353.94	1351038.14

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: F3XA

Transaction ID :

This report is being amended to update the debt schedule, based on the amended M10 Monthly 2017 filed 2/20/18. Please note that Planned Parenthood Votes complies with the best effort rules in accordance with 11 CFR 104.7. This committee specifically requests all pertinent information from contributors in its solicitations, including employer and occupation and informs contributors that the committee is required by law to obtain and report the same, and makes a follow-up request for omitted information when necessary.

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: PAGE 7 OF 20  
(check only one)

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

**Planned Parenthood Votes**

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

**A. Beeuwkes, Nancy, , ,**

Mailing Address 1360 Monument St

City  
Concord

State  
MA

Zip Code  
01742-5322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 18 / 2017

**Transaction ID : VV1NH9HQ1R3**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

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

**B. Burke, Jeffrey, , ,**

Mailing Address 1419 Laurel St

City

South Pasadena

State

CA

Zip Code

91030-4412

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Burke/Triolo Studios

Occupation (for Individual)  
Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 20 / 2017

**Transaction ID : VV1NH9HQ1P7**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. Espenscheid, Richard, , ,**

Mailing Address 12515 NW Jackson Quarry Rd

City

Hillsboro

State

OR

Zip Code

97124-8004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self Employed

Occupation (for Individual)  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 20 / 2017

**Transaction ID : VV1NH9HQ1N9**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

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

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

115000.00

# **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 20

(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. Schultz, Jamie, , ,

Mailing Address 9006 Green Oaks Cir

City  
DallasState  
TXZip Code  
75243-7212FEC 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 ▼

40000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 21 / 2017

Transaction ID : VV1NH9HQ1S1

Amount of Each Receipt this Period

40000.00

☐ Memo Item

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

B. Stoesz, Sarah, , ,

Mailing Address 1901 E River Pkwy

City

Minneapolis

State

MN

Zip Code

55414-3675

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PP Minnesota, North Dakota, South DakoOccupation (for Individual)  
President

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  
12 / 14 / 2017

Transaction ID : VV1NH9HQ1M2

Amount of Each Receipt this Period

500.00

☐ 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).....▶

40500.00

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

155500.00



**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 9 OF 20

<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. 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 M	/	D D D	/	Y Y Y Y Y
12		04		2017

FEC Identification Number

**C****Transaction ID : VV0P99H90H**

Amount of Each Disbursement this Period

101.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. 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 M	/	D D D	/	Y Y Y Y Y
12		22		2017

FEC Identification Number

**C****Transaction ID : VV0P99H91H**

Amount of Each Disbursement this Period

13.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Civis Analytics Inc.**

Mailing Address PO Box 4042

City  
ChicagoState  
ILZip Code  
60654-4042Purpose of Disbursement  
Database Services

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
12		12		2017

FEC Identification Number

**C****Transaction ID : VV0P99H90H**

Amount of Each Disbursement this Period

1371.30

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

1485.55

**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 10 OF 20

<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. Community Action Fund of Planned Parenthood Orange and San Bernadino Counties**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2017

Mailing Address 700 S Tustin St

City  
OrangeState  
CAZip Code  
92866-3425Purpose of Disbursement  
Travel Expenses

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : VV0P99H918I**

Amount of Each Disbursement this Period

916.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Evans & Katz, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		27		2017

Mailing Address PO Box 75357

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

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : VV0P99H910I**

Amount of Each Disbursement this Period

1994.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hustle, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		27		2017

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

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : VV0P99H90C**

Amount of Each Disbursement this Period

642.00

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

3552.16

**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 11 OF 20

<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	2	3		0	6			2	0	1	7		

Mailing Address 1130 Connecticut Ave NW  
Ste 1101City  
WashingtonState  
DCZip Code  
20036-3927Purpose of Disbursement  
Salary

Candidate Name

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

State: District:

FEC Identification Number

**C****Transaction ID : VV0P99H90J!**

Amount of Each Disbursement this Period

219.79

☐ 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	2	3		0	6			2	0	1	7		

Mailing Address 1130 Connecticut Ave NW  
Ste 1101City  
WashingtonState  
DCZip Code  
20036-3927Purpose of Disbursement  
Salary

Candidate Name

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

State: District:

FEC Identification Number

**C****Transaction ID : VV0P99H90K!**

Amount of Each Disbursement this Period

229.44

☐ 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	2	3		0	6			2	0	1	7		

Mailing Address 1130 Connecticut Ave NW  
Ste 1101City  
WashingtonState  
DCZip Code  
20036-3927Purpose of Disbursement  
Salary

Candidate Name

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

State: District:

FEC Identification Number

**C****Transaction ID : VV0P99H90N**

Amount of Each Disbursement this Period

48.12

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

497.35

**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 12 OF 20

<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. Orange Logic LLC**Mailing Address 19100 Von Karman Ave  
Ste 900City  
IrvineState  
CAZip Code  
92612-6597Purpose of Disbursement  
Database Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
12			27			2017					

FEC Identification Number

**C****Transaction ID : VV0P99H90P**

Amount of Each Disbursement this Period

726.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PhotoShelter Inc.**Mailing Address 33 Union Sq W  
Fl 2City  
New YorkState  
NYZip Code  
10003-3214Purpose of Disbursement  
Database Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
12			20			2017					

FEC Identification Number

**C****Transaction ID : VV0P99H90SI**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Council of Utah Inc.**

Mailing Address 654 S 900 E

City  
Salt Lake CityState  
UTZip Code  
84102-3430Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
12			12			2017					

FEC Identification Number

**C****Transaction ID : VV0P99H919**

Amount of Each Disbursement this Period

858.90

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

6585.70

**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 13 OF 20

<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 Advocates Mar Monte**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2017

Mailing Address 1605 The Alameda

City  
San JoseState  
CAZip Code  
95126-2202Purpose 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 : VV0P99H90V

Amount of Each Disbursement this Period

1145.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Advocates of Montana**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2017

Mailing Address 2525 4th Ave N  
Ste 201City  
BillingsState  
MTZip Code  
59101-1312Purpose 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 : VV0P99H90W

Amount of Each Disbursement this Period

515.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Advocates of Oregon**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2017

Mailing Address PO Box 12267

City  
PortlandState  
ORZip Code  
97212-0267Purpose 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 : VV0P99H91E

Amount of Each Disbursement this Period

687.12

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

2347.66

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

PAGE 14 OF 20

<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 Advocates of Wisconsin**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2017

Mailing Address 302 N Jackson St

City  
MilwaukeeState  
WIZip Code  
53202-5917Purpose of Disbursement  
Travel Expenses

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 C90008673

Transaction ID : VV0P99H91A

Amount of Each Disbursement this Period

286.30

☐ Memo Item

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 Y
12		19		2017

Mailing Address 555 Capitol Mall  
Ste 510City  
SacramentoState  
CAZip Code  
95814-4581Purpose of Disbursement  
Travel Expenses

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 : VV0P99H911:

Amount of Each Disbursement this Period

286.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Central Coast Action Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		26		2017

Mailing Address 518 Garden St

City  
Santa BarbaraState  
CAZip Code  
93101-1696Purpose of Disbursement  
Travel Expenses

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 : VV0P99H90T

Amount of Each Disbursement this Period

858.90

☐ Memo Item

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

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

1431.50

**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 15 OF 20

<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 Mid-Hudson Valley Action Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		28		2017

Mailing Address 17 Noxon St

City  
PoughkeepsieState  
NYZip Code  
12601-4101Purpose of Disbursement  
Travel Expenses

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 : VV0P99H912

Amount of Each Disbursement this Period

515.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Northern California Action Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		21		2017

Mailing Address PO Box 1116

City  
ConcordState  
CAZip Code  
94522-1116Purpose of Disbursement  
Travel Expenses

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 : VV0P99H90X

Amount of Each Disbursement this Period

801.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood of Minnesota, North Dakota, South Dakota**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2017

Mailing Address 671 Vandalia St

City  
Saint PaulState  
MNZip Code  
55114-1312Purpose of Disbursement  
Travel Expenses

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 : VV0P99H91F

Amount of Each Disbursement this Period

1505.12

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

2822.10

**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 16 OF 20

<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 Votes Colorado**

Mailing Address 7155 E 38th Ave

City  
DenverState  
COZip Code  
80207-1630Purpose of Disbursement  
Travel 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 Y
12	/	12	/	2017

FEC Identification Number

**C****Transaction ID : VV0P99H91B**

Amount of Each Disbursement this Period

343.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Votes Northwest and Hawaii**

Mailing Address 2001 E Madison St

City  
SeattleState  
WAZip Code  
98122-2959Purpose of Disbursement  
Travel 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 Y
12	/	19	/	2017

FEC Identification Number

**C****Transaction ID : VV0P99H90Y!**

Amount of Each Disbursement this Period

981.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Votes Northwest and Hawaii**

Mailing Address 2001 E Madison St

City  
SeattleState  
WAZip Code  
98122-2959Purpose of Disbursement  
Travel 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 Y
12	/	19	/	2017

FEC Identification Number

**C****Transaction ID : VV0P99H91C**

Amount of Each Disbursement this Period

65.44

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

1390.60



**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 17 OF 20

<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 Votes Northwest and Hawaii**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		26		2017

Mailing Address 2001 E Madison St

City  
SeattleState  
WAZip Code  
98122-2959Purpose of Disbursement  
Travel Expenses

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

**Transaction ID : VV0P99H913!**

Amount of Each Disbursement this Period

695.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Votes Northwest and Hawaii**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		26		2017

Mailing Address 2001 E Madison St

City  
SeattleState  
WAZip Code  
98122-2959Purpose of Disbursement  
Travel Expenses

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

**Transaction ID : VV0P99H914!**

Amount of Each Disbursement this Period

572.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PP Advocacy Project Los Angeles County**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2017

Mailing Address 555 Capitol Mall  
Ste 510City  
SacramentoState  
CAZip Code  
95814-4581Purpose of Disbursement  
Travel Expenses

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

**Transaction ID : VV0P99H91C**

Amount of Each Disbursement this Period

458.08

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

1725.98

**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 18 OF 20

<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. PP Advocates Pasadena and San Gabriel Valley**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12	/	12	/	2017

Mailing Address 1045 N Lake Ave

City  
PasadenaState  
CAZip Code  
91104-4521Purpose of Disbursement  
Travel Expenses

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VV0P99H91C

Amount of Each Disbursement this Period

400.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M	/	D D	/	Y 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

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M	/	D D	/	Y 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).....▶

400.82

22239.42

**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 19 OF 20

<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. Creative Strategy Lab, LLC**

Mailing Address 198 Indian Ave

City  
PortsmouthState  
RIZip Code  
02871-5131Purpose of Disbursement  
In-Kind for Digital Strategic Consulting to Non-Federal PAC

Candidate Name

**Planned Parenthood Virginia PAC**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
12	/	27	/	2017

FEC Identification Number

**C****Transaction ID : VV0P99H90R**

Amount of Each Disbursement this Period

10304.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

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

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

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

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).....▶

10304.08

10304.08

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

PAGE 20 OF 20

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

Community Outreach Group LLC

Nature of Debt (Purpose):

Canvassing. See Schedule E

Mailing Address 1110 Vermont Ave NW  
Ste 300City  
WashingtonState  
DCZip Code  
20005-6300

Outstanding Balance Beginning This Period

42.68

Transaction ID : VTYQS9H5MP7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

42.68

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

Hyatt Regency

Nature of Debt (Purpose):

In-Kind Lodging for Non-Federal Committee

Mailing Address 900 Bellevue Way NE

City  
BellevueState  
WAZip Code  
98004-4206

Outstanding Balance Beginning This Period

18900.77

Transaction ID : VTYQS9H5N89

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18900.77

C. 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

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

40153.85

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

40153.85

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) ►

40153.85