

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 REPORT NEW OR AMENDED (N) (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) [checked] 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

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

Election on MM/DD/YYYY in the State of

5. Covering Period 01/01/2018 through 01/31/2018

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 02/20/2018

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**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**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="2018"/>	<input type="text" value=""/>	<input type="text" value="1134445.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1134445.11"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="302616.10"/>	<input type="text" value="302616.10"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1437061.21"/>	<input type="text" value="1437061.21"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="182251.18"/>	<input type="text" value="182251.18"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1254810.03"/>	<input type="text" value="1254810.03"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="21253.08"/>	

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

**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).....	277500.00	277500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	277500.00	277500.00
(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) .....	277500.00	277500.00
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).....	25116.10	25116.10
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)).....▶	302616.10	302616.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	302616.10	302616.10

**DETAILED SUMMARY PAGE**

of Disbursements

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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 .....	4157.71	4157.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4157.71	4157.71
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	0.00
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).....	178093.47	178093.47
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)) ..	182251.18	182251.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	182251.18	182251.18

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	277500.00	277500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	277500.00	277500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4157.71	4157.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	25116.10	25116.10
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	- 20958.39	- 20958.39

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

Form/Schedule: F3XN  
Transaction ID :

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: (check only one)	PAGE 7 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)  
**Planned Parenthood Votes**

**A. Aberly, Naomi, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Mount Vernon Pl  
 City Boston State MA Zip Code 02108-1406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Volunteer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275000.00

Date of Receipt 01 / 08 / 2018  
**Transaction ID : VV1NH9HQC99**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item

**B. Aberly, Naomi, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Mount Vernon Pl  
 City Boston State MA Zip Code 02108-1406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Volunteer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275000.00

Date of Receipt 01 / 12 / 2018  
**Transaction ID : VV1NH9HQC82**  
 Amount of Each Receipt this Period 250000.00  
 Memo Item

**C. Lafer, Jill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1060 5th Ave  
 City New York State NY Zip Code 10128-0104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hoffman-Lafer Associates Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 01 / 26 / 2018  
**Transaction ID : VV1NH9HQCA7**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	277500.00
<b>TOTAL</b> This Period (last page this line number only).....	277500.00

**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 12  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A. Waterfront Strategies**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3050 K St NW  
 Ste 100  
 City Washington State DC Zip Code 20007-5161  
 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 ▼  
 25116.10

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 10 / 2018  
**Transaction ID : VV1NH9HQC B5**  
 Amount of Each Receipt this Period  
 25116.10  
 Memo Item  
 Refund

**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 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 Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25116.10
<b>TOTAL</b> This Period (last page this line number only).....▶	25116.10



**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)  
**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial) <b>A. Hustle, Inc.</b>			Date of Disbursement MM / DD / YYYY 01 / 23 / 2018	
Mailing Address 251 Kearny St Ste 300			FEC Identification Number C [REDACTED] <b>Transaction ID : VV0P99H94T</b> Amount of Each Disbursement this Period 642.00	
City San Francisco	State CA	Zip Code 94108-4547	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Software Licensing		Category/ Type		
Candidate Name				
Office 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:				

Full Name (Last, First, Middle Initial) <b>B. Midtown Personnel Inc.</b>			Date of Disbursement MM / DD / YYYY 01 / 30 / 2018	
Mailing Address 1130 Connecticut Ave NW Ste 1101			FEC Identification Number C [REDACTED] <b>Transaction ID : VV0P99H94W</b> Amount of Each Disbursement this Period 1986.08	
City Washington	State DC	Zip Code 20036-3927	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
Office 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:				

Full Name (Last, First, Middle Initial) <b>C. Premier Global Services</b>			Date of Disbursement MM / DD / YYYY 01 / 30 / 2018	
Mailing Address 3280 Peachtree Rd NE Ste 1000			FEC Identification Number C [REDACTED] <b>Transaction ID : VV0P99H94X</b> Amount of Each Disbursement this Period 1653.78	
City Atlanta	State GA	Zip Code 30305-2451	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Teleconferencing Services		Category/ Type		
Candidate Name				
Office 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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4281.86
<b>TOTAL</b> This Period (last page this line number only).....▶	4281.86

**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)  
**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Creative Strategy Lab, LLC**

Mailing Address 198 Indian Ave

City  
Portsmouth

State  
RI

Zip Code  
02871-5131

Purpose of Disbursement  
In-Kind to Non-Federal Committee for Digital Strategic Consulting

Candidate Name

**Planned Parenthood Virginia PAC**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	8

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VV0P99H94S**  
Amount of Each Disbursement this Period  
[Redacted] 9039.69

Memo Item

Full Name (Last, First, Middle Initial)

**B. Democratic Attorneys General Association**

Mailing Address PO Box 15776

City  
Washington

State  
DC

Zip Code  
20003-0776

Purpose of Disbursement  
Non-Federal Contribution

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
0	1		2	3		2	0	1	8

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VV0P99H94V**  
Amount of Each Disbursement this Period  
[Redacted] 150000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hyatt Regency**

Mailing Address 900 Bellevue Way NE

City  
Bellevue

State  
WA

Zip Code  
98004-4206

Purpose of Disbursement  
Payment for In-Kind Lodging for Non-Federal Committee

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
0	1		3	0		2	0	1	8

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VV0P99H951**  
Amount of Each Disbursement this Period  
[Redacted] 18900.77

Memo Item In-Kind Previously Disclosed on October 2017 Monthly Report

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

[Redacted] 177940.46

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

[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 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. Planned Parenthood Action Fund**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
01		31		2018

Mailing Address 123 William St  
FI 10

City New York State NY Zip Code 10038-3844

Purpose of Disbursement  
In-Kind to Non-Federal Committee for Staff Time

FEC Identification Number

**C**   
**Transaction ID : VV0P99H94Q**  
 Amount of Each Disbursement this Period  
 153.01

Candidate Name  
**Planned Parenthood Action Fund of New Jersey**

Category/  
Type

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

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

FEC Identification Number

**C**   
 Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

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

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

FEC Identification Number

**C**   
 Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

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

Memo Item

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

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

153.01
178093.47

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 12
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Community Outreach Group LLC</b>			Nature of Debt (Purpose): Canvassing. See Schedule E
Mailing Address 1110 Vermont Ave NW Ste 300			
City Washington	State DC	Zip Code 20005-6300	

Outstanding Balance Beginning This Period <input type="text" value="42.68"/>	<b>Transaction ID : VTYQS9H5MP7</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="42.68"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Hyatt Regency</b>			Nature of Debt (Purpose): In-Kind Lodging for Non-Federal Committee
Mailing Address 900 Bellevue Way NE			
City Bellevue	State WA	Zip Code 98004-4206	

Outstanding Balance Beginning This Period <input type="text" value="18900.77"/>	<b>Transaction ID : VTYQS9H5N89</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="18900.77"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Terris, Barnes, Walters</b>			Nature of Debt (Purpose): Canvass Lit. See Schedule E
Mailing Address 400 Montgomery St Ste 700			
City San Francisco	State CA	Zip Code 94104-1219	

Outstanding Balance Beginning This Period <input type="text" value="21210.40"/>	<b>Transaction ID : VTYQS9H5MN9</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="21210.40"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="21253.08"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="21253.08"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="21253.08"/>