24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48					
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼					
MI Planned Parenthood Votes						
	C C00568931					
Check if X 24-hour report 48-hour report New report X Amends report filed on 06 10 2021						
Full Name of Payee	Date of Public Distribution/Dissemination					
Community Outreach Group	10 21 / Y 2020 Amount					
Mailing Address 1110 Vermont Ave. NW						
Suite 300	Amount					
City State Zip Code	20000.00					
Washington DC 20005	Transaction ID : SE.4351 Date of Disbursement or Obligation					
Purpose of Expenditure Canvass Category/ Type 004	10 12 / Y Y Y Y Y Y					
Name of Federal Candidate Support Office	ce Sought:					
ESSHAKI, ERIC, , ,	President Senate State: MI					
Calendar Year-To-Date Per Election for Office Sought Dist 2020	oursement For: Primary X General Other (specify) ▶					
Full Name of Payee	Date of Public Distribution/Dissemination					
Community Outreach Group	10 21 2020					
Mailing Address 1110 Vermont Ave. NW						
Suite 300	Amount					
City State Zip Code	20000.00					
Washington DC 20005	Transaction ID : SE.4355 Date of Disbursement or Obligation					
Purpose of Expenditure Canyass Category/ 004	M - M / D - D / Y - Y - Y					
Canvass Type 004	10 12 2020					
Name of Federal Candidate Support Office	ce Sought: 🗶 House District:08					
JUNGE, PAUL, , ,	President Senate State: MI					
Calendar Year-To-Date Per Election for Office Sought Dist 202	bursement For: Primary General Other (specify)					
(a) SUBTOTAL of Itemized Independent Expenditures	40000.00					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL lader as deat Fun and it was						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert						
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Keserich, John, Thomas, ,	M / D D / Y Y Y Y Y					
(77)	06 10 2021					
Oignaturo						

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Sch	edule E)	JII OI LEO	PAGE 2 OF 4 FOR SE OF FORM 24/48
	E OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
MI	Planned Parenthood Votes		C C00568931
Chec	k if X 24-hour report 48-hour report New re	port X Amends report	filed on 06 10 2021
	Full Name of Payee Community Outreach Group		Date of Public Distribution/Dissemination
N	Mailing Address 1110 Vermont Ave. NW		10
	Suite 300	7: 0 !	
-	City State Washington DC	Zip Code 20005	20000.00 Transaction ID : SE.4358 Date of Disbursement or Obligation
	Purpose of Expenditure Canvass	Category/ Type 004	10 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
N	Name of Federal Candidate	✗ Support	Office Sought:
	STEVENS, HALEY, , ,	Oppose	President Senate State: MI
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary X General 2020 Other (specify) ▶
	Full Name of Payee Community Outreach Group		Date of Public Distribution/Dissemination
N	Mailing Address 1110 Vermont Ave. NW		Amount
	Suite 300	Zin Code	20000 00
	City State Washington DC	Zip Code 20005	20000.00 Transaction ID : SE.4363 Date of Disbursement or Obligation
	Purpose of Expenditure Canvass	Category/ Type 004	M 10 / 12 / Y 2020
N	Name of Federal Candidate	x Support	Office Sought:
	SLOTKIN, ELISSA, , ,	Oppose	President Senate State: MI
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General Other (specify) Other
(a)) SUBTOTAL of Itemized Independent Expenditures		40000.00
(b)) SUBTOTAL of Unitemized Independent Expenditures		•
(c)) TOTAL Independent Expenditures		•
wit	nder penalty of perjury I certify that the independent expenditure th, or at the request or suggestion of, any candidate or authorize arty committee) any political party committee or its agent.		
		nically Filed] Date	M = M / D = D / Y = Y = Y = Y = O
	Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	DENT EXTEND	ITOTILO		PAGE 3 OF 4 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER ▼		
MI Planned Parenthood Votes			C	C00568931		
Check if X 24-hour report 48-hour report New report X Amends report filed on 06 10 2021						
Full Name of Payee Community Outreach Group			M = N			
Mailing Address 1110 Vermont Ave. NW			10 Amount	21 2020		
Suite 300						
City	State DC	Zip Code	Transacti	20000.00		
Washington	DC	20005		on ID: SE.4368 isbursement or Obligation		
Purpose of Expenditure Canvass		Category/ Type 004	M 10	12 / 2020		
Name of Federal Candidate		Support	Office Sought:	¥ House District:06		
UPTON, FREDERICK STEPHEN, , ,		X Oppose	President	Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought		45670.11	Disbursement Fo	or: Primary x General (specify) ►		
Full Name of Payee			Date of P	Public Distribution/Dissemination		
Community Outreach Group			10	/ 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1110 Vermont Ave. NW						
Suite 300			Amount			
City	State	Zip Code		20000.00		
Washington	DC	20005		on ID : SE.4353 Disbursement or Obligation		
Purpose of Expenditure Canvass		Category/ Type 004	10	21 / 2020		
Name of Federal Candidate		✗ Support	Office Sought:	₩ House District:06		
HOADLEY, JON, , ,		Oppose	President	Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought	.,,.,,	65670.11	Disbursement For 2020 Other	or: Primary X General		
(a) SUBTOTAL of Itemized Independent Expenditures						
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures			•	47- 1 47- 1 47- 1		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Keserich, John, Thomas, , Signature	[Electron	ically Filed] Date		10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
y						

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
MI Planned Parenthood Votes	C C00568931				
	O coccess.				
Check if 24-hour report 48-hour report New report Amends report file	led on 06 10 2021				
Full Name of Payee The New Media Firm	Date of Public Distribution/Dissemination				
Mailing Address 1730 Rhode Island NW	10 21 2020				
Suite 213	Amount				
City State Zip Code	40000.41				
Washington DC 20036	Transaction ID : SE.4347 Date of Disbursement or Obligation				
Purpose of Expenditure GOTV ad Category/ Type 004	10 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate Support Of	ffice Sought: House District:				
PETERS, GARY, , , Oppose	President Senate State: MI				
Odichadi Ical Io Dalc	sbursement For: Primary x General 20 Other (specify) ▶				
Full Name of Payee	Date of Public Distribution/Dissemination				
	M = M / D = D / Y = Y = Y				
Mailing Address	Amount				
City State Zip Code					
Purpose of Expenditure Category/	Date of Disbursement or Obligation				
Type					
Name of Federal Candidate Support Of	ffice Sought: House District:				
Oppose [President Senate State:				
Calondar Tour To Bato	isbursement For: Primary General				
Per Election for Office Sought	Other (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures	40000.41				
(b) SUBTOTAL of Unitermized Independent Expenditures					
(c) TOTAL Independent Expenditures	160000.41				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Keserich, John, Thomas, , [Electronically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Signature					