

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Planned Parenthood Action Fund Inc. PAC

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	0	4

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	4

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>4</td></tr></table>	Y	Y	Y	Y	2	0	0	4		4711.70
Y	Y	Y	Y							
2	0	0	4							
(b) Cash on Hand at Beginning of Reporting Period	47191.78									
(c) Total Receipts (from Line 19)	139585.40	1576545.74								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	186777.18	1581257.44								
7. Total Disbursements (from Line 31)	181596.66	1576076.92								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5180.52	5180.52								
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)	0.00									

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 Action Fund Inc. PAC

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	0	4

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	4

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	4850.00	123360.00
(i) Itemized (use Schedule A)	22671.82	637788.14
(ii) Unitemized	27521.82	761148.14
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	27521.82	761148.14
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)	2019.27	16024.03
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	10000.00	13000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	100044.31	786373.57
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 Transfer (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))	139585.40	1576545.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	139585.40	1576545.74

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	4593.37	21829.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	4593.37	21829.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-11500.00	626615.57
24. Independent Expenditure (use Schedule E)	0.00	19344.31
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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	5500.00
(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	5500.00
29. Other Disbursements.....	188503.29	902787.66
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	181596.66	1576076.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	181596.66	1576076.92

DETAILED SUMMARY PAGE
of Disbursements

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)	27521.82	761148.14
34. Total Contribution Refunds (from Line 28(d))	0.00	5500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27521.82	755648.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4593.37	21829.38
37. Offsets to Operating Expenditures (from Line 15, page 3)	2019.27	16024.03
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2574.10	5805.35

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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 Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)
Peter G Joseph, M.D.

Mailing Address 53 Summit Road

City State Zip Code
San Anselmo CA 94960

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 4

Transaction ID: A2004-1632127

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
THELME LINDBLADE

Mailing Address 2540 Jackson Street

City State Zip Code
San Diego CA 92110

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 4

Transaction ID: A2004-84124

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
KYRA MONTAGU

Mailing Address 76 Walnut Place

City State Zip Code
Brookline Village MA 02445

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Social Work (Therapist)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 4

Transaction ID: A2004-84127

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. Ms. Sarah Morian		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 4	
Mailing Address 1810 Bissonnet Street		Transaction ID: A2004-1632071	
City State Zip Code Houston TX 77005		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation DX Service Co Inc. Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. BARBARA SCHADLER		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 4	
Mailing Address 3415 Shepherd Street		Transaction ID: A2004-84129	
City State Zip Code Chevy Chase MD 20815		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Lichtman, Trister & Ross LLC Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Gail Sinai		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 4	
Mailing Address 1 Irving Place #P27-D		Transaction ID: A2004-1632114	
City State Zip Code New York NY 10003		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Information Requested Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 25
	<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	

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. Dee Stegman		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 4	
Mailing Address 15 Reily Road		Transaction ID: A2004-1632070	
City State Zip Code Cincinnati OH 45215		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Real Estate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. MARIETTA WILKINSON		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 7 / 2 0 0 4	
Mailing Address 166 Seven Hills Lake Dr		Transaction ID: A2004-84126	
City State Zip Code Carmel NY 10512		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested Occupation Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Katharine Woods		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 4	
Mailing Address PO Box 964		Transaction ID: A2004-1632122	
City State Zip Code Hailey ID 83333		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested Occupation Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	1600.00
TOTAL This Period (last page this line number only) ▶	4850.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 25
	<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)
Planned Parenthood Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. Planned Parenthood Action Fund Inc.		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 4
Mailing Address 434 West 33rd Street		Transaction ID: A5697
City State Zip Code New York NY 10001	Amount of Each Receipt this Period 1644.94	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8866.36	Rembursement of Administrative Expenses

Full Name (Last, First, Middle Initial) B. Planned Parenthood Action Fund Inc.		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 4
Mailing Address 434 West 33rd Street		Transaction ID: A5698
City State Zip Code New York NY 10001	Amount of Each Receipt this Period 374.33	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 9240.69	Rembursement of Administrative Expenses

Full Name (Last, First, Middle Initial) C. Planned Parenthood Action Fund Inc.		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 4
Mailing Address 434 West 33rd Street		Transaction ID: A5699
City State Zip Code New York NY 10001	Amount of Each Receipt this Period 1067.71	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1067.71	[MEMO ITEM] Rembursement due for Administrative Expenses. See end note.

SUBTOTAL of Receipts This Page (optional) ▶	2019.27
TOTAL This Period (last page this line number only) ▶	2019.27

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)
Charles Rangel for Congress
Mailing Address P.O. Box 5577 Manhattanville Sta.
City State Zip Code
New York NY 10027
FEC ID number of contributing federal political committee. **C** C00302422
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 4
Transaction ID: A4442
Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Cmte to Elect Gary Ackerman
Mailing Address 100 Jericho Quadrangle Suite 233
City State Zip Code
Jericho NY 11753
FEC ID number of contributing federal political committee. **C** C00165241
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 4
Transaction ID: A4431
Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Cmte to Re-Elect Ed Towns
Mailing Address 438 Lewis Ave.
City State Zip Code
Brooklyn NY 11233
FEC ID number of contributing federal political committee. **C** C00197285
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 1 / 2 0 0 4
Transaction ID: A4444
Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 25
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input type="checkbox"/> 12
		<input checked="" type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)
Ed Markey for Congress

Mailing Address P.O. Box 526

City State Zip Code
Medford MA 02155

FEC ID number of contributing federal political committee. **C** C00196774

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 1 / 2 0 0 4

Transaction ID: A4440

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Engel for Congress

Mailing Address P.O. Box 60

City State Zip Code
Bronx NY 10463

FEC ID number of contributing federal political committee. **C** C00236513

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 4

Transaction ID: A4432

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Hoyer for Congress

Mailing Address 7905 Malcolm Road Suite 102

City State Zip Code
Clinton MD 20735

FEC ID number of contributing federal political committee. **C** C00140715

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 1 / 2 0 0 4

Transaction ID: A4435

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)
Larson for Congress

Mailing Address 29 Ruff Circle

City State Zip Code
Glastonbury CT 06033

FEC ID number of contributing federal political committee. **C** C00330142

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 4

Transaction ID: A4439

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mike Honda for Congress

Mailing Address 50 W. San Fernando St. Ste. 350

City State Zip Code
San Jose CA 95113

FEC ID number of contributing federal political committee. **C** C00351379

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 1 / 2 0 0 4

Transaction ID: A4434

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Simmons for Congress

Mailing Address P.O. Box 268 Drawer 271

City State Zip Code
Stonington CT 06378

FEC ID number of contributing federal political committee. **C** C00343921

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 4

Transaction ID: A4443

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **6000.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 25
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)
Stephanie Tubbs Jones for Congress

Mailing Address 3645 Warrensville Center Road

City State Zip Code
Shaker Heights OH 44122

FEC ID number of contributing federal political committee. **C** C00334151

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 4

Transaction ID: A4445

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Tom Lantos for Congress

Mailing Address P.O. Box 611

City State Zip Code
Burlingame CA 94011

FEC ID number of contributing federal political committee. **C** C00112250

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 4

Transaction ID: A4438

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	10000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Planned Parenthood Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)
Bank of New York

Mailing Address 1290 Avenue of the Americas

City State Zip Code
New York NY 10104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1048.99

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 4

Transaction ID: A4447

Amount of Each Receipt this Period
29.60

B. Full Name (Last, First, Middle Initial)
Bank of New York

Mailing Address 1290 Avenue of the Americas

City State Zip Code
New York NY 10104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1063.70

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 4

Transaction ID: A4446

Amount of Each Receipt this Period
14.71

C. Full Name (Last, First, Middle Initial)
Planned Parenthood Federation of America Inc.

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 2 / 2 0 0 4

Transaction ID: A5703

Amount of Each Receipt this Period
100000.00

Partial return of temporary transfer made on 10/26-04

SUBTOTAL of Receipts This Page (optional)	100044.31
TOTAL This Period (last page this line number only)	100044.31

**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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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 Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: B154393	
Mailing Address P.O. Box 53852		Date of Disbursement 11 / 30 / 2004	
City Phoenix	State AZ	Zip Code 85072	Amount of Each Disbursement this Period 130.40
Purpose of Disbursement Discount Fee		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: AZ	District:		

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: B154394	
Mailing Address P.O. Box 53852		Date of Disbursement 12 / 30 / 2004	
City Phoenix	State AZ	Zip Code 85072	Amount of Each Disbursement this Period 29.25
Purpose of Disbursement Discount Fee		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: AZ	District:		

Full Name (Last, First, Middle Initial) C. Bank of New York		Transaction ID: B154405	
Mailing Address 1290 Avenue of the Americas		Date of Disbursement 11 / 30 / 2004	
City New York	State NY	Zip Code 10104	Amount of Each Disbursement this Period 2100.53
Purpose of Disbursement Bank Fees		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: NY	District:		

SUBTOTAL of Disbursements This Page (optional)	2260.18
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 Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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 Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. Bank of New York		Transaction ID: B154406 Date of Disbursement
Mailing Address 1290 Avenue of the Americas		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="4"/>
City New York	State NY	Zip Code 10104
Purpose of Disbursement Bank Fees	<input type="text" value="001"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: NY District:	Not Applicable	
		Amount of Each Disbursement this Period <input type="text" value="750.06"/>

Full Name (Last, First, Middle Initial) B. Deluxe Business Forms & Supplies		Transaction ID: B81357 Date of Disbursement
Mailing Address P.O. Box 742572		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="4"/>
City Cincinnati	State OH	Zip Code 45274
Purpose of Disbursement Check Order	<input type="text" value="001"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: OH District:	Not Applicable	
		Amount of Each Disbursement this Period <input type="text" value="87.95"/>

SUBTOTAL of Disbursements This Page (optional)

838.01

TOTAL This Period (last page this line number only)

3098.19

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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 Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. Kirk for Congress Inc.		Transaction ID: B81085 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 4	
Mailing Address 509 Park Avenue		Amount of Each Disbursement this Period -2000.00	
City Winnetka State IL Zip Code 60043	Purpose of Disbursement G-2004 U.S. House 10 IL Candidate Name Mark S Kirk	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Voided check: Reported on April 2004 Monthly Report	

Full Name (Last, First, Middle Initial) B. Friends of Barbara Boxer		Transaction ID: B81430 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 4	
Mailing Address 5757 Wilshire Blve. #395		Amount of Each Disbursement this Period -1000.00	
City Los Angeles State CA Zip Code 90036	Purpose of Disbursement G-2004 U.S. Senate CA Candidate Name Barbara Boxer	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Voided check: Reported on October 2004 Monthly Report	

Full Name (Last, First, Middle Initial) C. Friends of Barbara Boxer		Transaction ID: B81250 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 4	
Mailing Address 5757 Wilshire Blvd. #395		Amount of Each Disbursement this Period -4000.00	
City Los Angeles State CA Zip Code 90036	Purpose of Disbursement G-2004 U.S. Senate CA Candidate Name Barbara Boxer	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Voided check: Reported on September 2004 Monthly Report	

SUBTOTAL of Disbursements This Page (optional) ▶	-7000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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 Action Fund Inc. PAC

A. Bob Matsui for Congress Cmte Full Name (Last, First, Middle Initial) Mailing Address 8665 Wilshire Blvd Ste 220 City Beverly Hills State CA Zip Code 90211 Purpose of Disbursement G-2004 U.S. House 05 CA Candidate Name Robert T Matsui Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 05 Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B81330 Date of Disbursement 12 / 20 / 2004 Amount of Each Disbursement this Period -2500.00 Voiced check: Reported on 2004 Post-General Report
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B. Friends of Frank Barbaro Full Name (Last, First, Middle Initial) Mailing Address 1806 West 10th Street City Brooklyn State NY Zip Code 11223 Purpose of Disbursement G-2004 U.S. House 13 NY Candidate Name Frank Barbaro Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13 Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B81334 Date of Disbursement 12 / 09 / 2004 Amount of Each Disbursement this Period -5000.00 Voiced check: Reported on 2004 Post-General Report
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C. Broomfield for Congress Committee Full Name (Last, First, Middle Initial) Mailing Address 5150 Waukomis Dr. City Kansas City State MO Zip Code 64151 Purpose of Disbursement G-2004 U.S. House 06 MO Candidate Name Charles Broomfield Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06 Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B81337 Date of Disbursement 12 / 20 / 2004 Amount of Each Disbursement this Period -2000.00 Voiced check: Reported on 2004 Post-General Report
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SUBTOTAL of Disbursements This Page (optional) ▶	-9500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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 Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. Wynn for Congress		Transaction ID: B81517 Date of Disbursement 12 / 20 / 2004
Mailing Address P.O. Box 39139		Amount of Each Disbursement this Period -500.00
City Washington State DC Zip Code 20016	Purpose of Disbursement G-2004 U.S. House 04 MD Candidate Name Albert Wynn Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 04	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Voided check: Reported on 2004 Post-General Report

Full Name (Last, First, Middle Initial) B. Andrews for Congress		Transaction ID: B81518 Date of Disbursement 12 / 20 / 2004
Mailing Address 215 Fourth Avenue Suite 200		Amount of Each Disbursement this Period -500.00
City Haddon Heights State NJ Zip Code 08035	Purpose of Disbursement G-2004 U.S. House 01 NJ Candidate Name Robert Andrews Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Voided check: Reported on 2004 Post-General Report

Full Name (Last, First, Middle Initial) C. Friends of Frank Barbaro		Transaction ID: B81358 Date of Disbursement 11 / 30 / 2004
Mailing Address 1806 West 10th Street		Amount of Each Disbursement this Period 5000.00
City Brooklyn State NY Zip Code 11223	Purpose of Disbursement O-2004 U.S. House 13 NY Candidate Name Frank Barbaro Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Debt Ret General	

SUBTOTAL of Disbursements This Page (optional)	4000.00
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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 Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. Friends of Hillary		Transaction ID: B81359 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 4	
Mailing Address 1717 K Street NW Suite 309A		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20036	Purpose of Disbursement P-2006 U.S. Senate NY	011 Category/ Type	
Candidate Name Hillary R Clinton	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District:			

SUBTOTAL of Disbursements This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	-11500.00

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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 Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. WA State Dem Central Cmte NonExempt Acct.		Transaction ID: B81360 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 4
Mailing Address 616 First Avenue Suite 300		Amount of Each Disbursement this Period 1000.00
City Seattle State WA Zip Code 98194	Purpose of Disbursement For use in WA Gov. Elec. Recount Candidate Name 011 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District:		Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

Full Name (Last, First, Middle Initial) B. Planned Parenthood Action Fund Inc.		Transaction ID: B111026 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 4
Mailing Address 434 West 33rd Street		Amount of Each Disbursement this Period 76503.29
City New York State NY Zip Code 10001	Purpose of Disbursement Transfer Out Candidate Name 010 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:		Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

Partial transfer out of funds deposited in error. See Line 11(a)(ii) of Pre-Gen and Post-Gen Rpts

Full Name (Last, First, Middle Initial) C. Planned Parenthood Action Fund Inc.		Transaction ID: B154410 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 4
Mailing Address 434 West 33rd Street		Amount of Each Disbursement this Period 51000.00
City New York State NY Zip Code 10001	Purpose of Disbursement Refund of transfer in error Candidate Name 010 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:		Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

Refund of 11/9/04 transfer due to accounting error shown on Line 17 of Post-General Report

SUBTOTAL of Disbursements This Page (optional) ▶	128503.29
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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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 Action Fund Inc. PAC

Full Name (Last, First, Middle Initial) A. Planned Parenthood Foundation		Transaction ID: B111178 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 4
Mailing Address 434 West 33rd Street		Amount of Each Disbursement this Period 10000.00
City New York State NY Zip Code 10001	010 Category/Type	
Purpose of Disbursement Refund of transfer in error Candidate Name		Refund of 11/10/04 transfer due to accounting error shown on Line 17 of Post-General Report
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) B. Planned Parenthood Action Fund Inc.		Transaction ID: B110879 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 4
Mailing Address 434 West 33rd Street		Amount of Each Disbursement this Period 30000.00
City New York State NY Zip Code 10001	010 Category/Type	
Purpose of Disbursement Refund of transfers & deposits in error Candidate Name		Refund of transfers and deposits in error. See end note
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) C. Planned Parenthood Action Fund Inc.		Transaction ID: B110880 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 0 4
Mailing Address 434 West 33rd Street		Amount of Each Disbursement this Period 12000.00
City New York State NY Zip Code 10001	010 Category/Type	
Purpose of Disbursement Refund of deposits in error Candidate Name		Partial transfer out of deposits in error. See end note
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional) ▶	52000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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 Action Fund Inc. PAC

A. Full Name (Last, First, Middle Initial)
Planned Parenthood Action Fund Inc.

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
Refund of deposits in error

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

State: NY District:

Disbursement For: 2004
 Primary General
 Other (specify) ▼

Not Applicable

Transaction ID: B110881

Date of Disbursement

12 / 31 / 2004

Amount of Each Disbursement this Period

8000.00

Partial transfer out of
deposits in error. See end
note

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

188503.29

Form/Schedule: **SA15**
Transaction ID: **A5699**

This amount represents a reimbursement due for administrative expenses from the Action Fund which was offset against an amount due to the Action Fund related to contributions deposited in error as shown on Line 11(a)(ii) of the Post-General and Year End Report totaling \$95,124.

Form/Schedule: **SB29**
Transaction ID: **B110879**

\$24,309.87 is a refund of the 9/15/04 transfer in error shown on Line 17 of October Monthly Report. The remaining \$5,690.13 represents a partial transfer out of the remaining deposits in error shown on Line 11(a)(ii) of the Post-General Report.

Form/Schedule: **SB29**
Transaction ID: **B110880**

This amount reflects a partial transfer out of the remaining deposits in error shown on Line 11(a)(ii) of the Post-General Report.

Form/Schedule: **SB29**
Transaction ID: **B110881**

\$930.58 of this amount reflects a partial transfer out of the remaining deposits in error shown on Line 11(a)(ii) of the Post-General Report and a transfer out of an \$800.00 deposit in error shown on Line 11(a)(ii) of this report. \$1,043.25 represents a refund of administrative expense reimbursements received in error; the balance (\$6,026.17) represents a transfer.