

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ C C00489799
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Itzamna Translations Company		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 17 / 2016	
Mailing Address P.O. Box 1015		Amount 2.59	
City Glendale	State AZ	Zip Code 85311	Transaction ID : B598490
Purpose of Expenditure Translation fee	Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 17 / 2016	
Name of Federal Candidate Hillary Clinton		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought 1179003.94		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ <u>Democratic Primary</u>	

Full Name of Payee <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount 	
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure	Category/Type 	Name of Federal Candidate	
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	889003.04

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.

Deirdre Schifeling [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Signature