

# 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.

Planned Parenthood Votes

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT  NEW (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:
- |                                      |                                      |  |  |
|--------------------------------------|--------------------------------------|--|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)             | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)             | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input checked="" type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Liz Gustafson

Signature of Treasurer Liz Gustafson [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

|                 |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Planned Parenthood Votes**

Report Covering the Period: From:  /  /  To:  /  /

|  | COLUMN A<br>This Period                 | COLUMN B<br>Calendar Year-to-Date       |
|--|---|---|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2014"/>  | <input type="text" value="367024.11"/>  | <input type="text" value="367024.11"/>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="1720400.28"/> |   |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="2075243.23"/> | <input type="text" value="4783425.47"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="3795643.51"/> | <input type="text" value="5150449.58"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="2327169.56"/> | <input type="text" value="3681975.63"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="1468473.95"/> | <input type="text" value="1468473.95"/> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>       |   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="967273.70"/>  |   |

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:  /  /

| <b>I. Receipts</b>  | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|---|---------------------------------------|---|
| 11. Contributions (other than loans) From:  |                                       |   |
| (a) Individuals/Persons Other Than Political Committees   |                                       |   |
| (i) Itemized (use Schedule A).....  | 2073864.23                            | 4773500.15                                |
| (ii) Unitemized .....   | 150.00                                | 1696.32                                   |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 2074014.23                            | 4775196.47                                |
| (b) Political Party Committees .....  | 0.00                                  | 0.00                                      |
| (c) Other Political Committees (such as PACs).....  | 0.00                                  | 2000.00                                   |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 2074014.23                            | 4777196.47                                |
| 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.).....   | 1229.00                               | 6229.00                                   |
| 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))..... ▶                        | 2075243.23                            | 4783425.47                                |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 2075243.23                            | 4783425.47                                |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 714150.00                     | 1113847.38                        |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 714150.00                     | 1113847.38                        |
| 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) .....  | 1326921.74                    | 1558988.08                        |
| 25. Coordinated Party Expenditures (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                          | 5146.32                           |
| (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                          | 5146.32                           |
| 29. Other Disbursements .....  | 286097.82                     | 1003993.85                        |
| 30. Federal Election Activity (2 U.S.C. §431(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)) ..      | 2327169.56                    | 3681975.63                        |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 2327169.56                    | 3681975.63                        |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 2074014.23                    | 4777196.47                        |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 5146.32                           |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 2074014.23                    | 4772050.15                        |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 714150.00                     | 1113847.38                        |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 714150.00                     | 1113847.38                        |

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

Form/Schedule: F3XA

Transaction ID :

This amendment is being filed to correct the debt totals (transaction D739012) on Schedule D and the North Carolina Calendar Year to Date per Election for Office Sought totals on Schedule E. Please update your records accordingly.

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 71                 |
|   | <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 Votes**

**A. Ms. Nancy Beeuwkes**  
Full Name (Last, First, Middle Initial)

Mailing Address 1360 Monument Street

City State Zip Code  
Concord MA 01742

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

Name of Employer Occupation  
None Home maker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 24 / 2014  
**Transaction ID : A2014-2297148**

Amount of Each Receipt this Period  
100000.00

**B. Mr. Michael Bloomberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 17 East 79th Street

City State Zip Code  
New York NY 10075

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

Name of Employer Occupation  
BLOOMBERG LP Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2014  
**Transaction ID : A2014-2297149**

Amount of Each Receipt this Period  
1000000.00

**C. Merle C Chambers**  
Full Name (Last, First, Middle Initial)

Mailing Address 44 Cook Street, Suite 200

City State Zip Code  
Denver CO 80206

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

Name of Employer Occupation  
None Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 24 / 2014  
**Transaction ID : A2014-2297150**

Amount of Each Receipt this Period  
25000.00

|  |            |
|--|------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 1125000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |            |

**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 8 OF 71                 |
|   | <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 Votes**

**A. Shelly D Chigier**  
Full Name (Last, First, Middle Initial)

Mailing Address 237 Summer Street

City Manchester State MA Zip Code 01944

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : A2014-2297151**

Amount of Each Receipt this Period  
 12500.00

**B. C Dean Debnam**  
Full Name (Last, First, Middle Initial)

Mailing Address 255 Penley Circle

City Raleigh State NC Zip Code 27609

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

Name of Employer Workplace Options Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2014  
**Transaction ID : A2014-2297152**

Amount of Each Receipt this Period  
 5000.00

**C. Mr. Lee Fikes**  
Full Name (Last, First, Middle Initial)

Mailing Address 3901 Euclid Ave

City Dallas State TX Zip Code 75205

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

Name of Employer Bonanza Oil Company Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2014  
**Transaction ID : A2014-2297153**

Amount of Each Receipt this Period  
 33000.00

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 50500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |          |



**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 9 OF 71  |
| <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 Votes**

**A. Susan C Kaplan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2 Newton Executive Park #300

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>Newton | State<br>MA | Zip Code<br>02462 |
|----------------|-------------|-------------------|

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

|   |                       |
|---|-----------------------|
| Name of Employer<br>Kaplan Financial Services | Occupation<br>Finance |
|---|-----------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 08    | / | 2014        |

**Transaction ID : A2014-2297154**

Amount of Each Receipt this Period  
25000.00

**B. Jill Lafer**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1060 Fifth Avenue #7B

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>New York | State<br>NY | Zip Code<br>10128-0104 |
|------------------|-------------|------------------------|

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

|  |                        |
|--|------------------------|
| Name of Employer<br>Hoffman-Lafer Associates | Occupation<br>Attorney |
|--|------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 23    | / | 2014        |

**Transaction ID : A2014-2297155**

Amount of Each Receipt this Period  
5000.00

**C. Barbara F Lee**  
Full Name (Last, First, Middle Initial)  
Mailing Address 131 Mt. Auburn Street Ste 2

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Cambridge | State<br>MA | Zip Code<br>02138 |
|-------------------|-------------|-------------------|

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

|  |                                      |
|--|--------------------------------------|
| Name of Employer<br>Barbara Lee Foundation | Occupation<br>Founder/Philanthropist |
|--|--------------------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
160000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 02    | / | 2014        |

**Transaction ID : A2014-2297156**

Amount of Each Receipt this Period  
160000.00

|  |           |
|--|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 190000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |           |

**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 10 OF 71   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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

|   |                                     |  |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Elaine F Marshall</b>  |                                     | Date of Receipt<br>09 / 18 / 2014<br><b>Transaction ID : A2014-2297157</b> |
| Mailing Address 3920 City of Oaks Wynd  |                                     | Amount of Each Receipt this Period<br>500.00                               |
| City Raleigh  | State NC                            | Zip Code 27612   |
| FEC ID number of contributing federal political committee. C  |                                     |  |
| Name of Employer<br>State of North Carolina   | Occupation<br>Attorney              |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |  |

|   |                                      |  |
|---|--------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Noah McCormack</b>   |                                      | Date of Receipt<br>09 / 20 / 2014<br><b>Transaction ID : A2014-2297158</b> |
| Mailing Address 709 Buchanan Street   |                                      | Amount of Each Receipt this Period<br>10000.00                             |
| City San Francisco  | State CA                             | Zip Code 94102   |
| FEC ID number of contributing federal political committee. C  |                                      |  |
| Name of Employer<br>Self - Employed   | Occupation<br>Writer                 |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>10000.00 |  |

|   |                                      |  |
|---|--------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Marie McKellar</b>   |                                      | Date of Receipt<br>09 / 23 / 2014<br><b>Transaction ID : A2014-2297159</b> |
| Mailing Address PO Box 149  |                                      | Amount of Each Receipt this Period<br>20000.00                             |
| City Dobbs Ferry  | State NY                             | Zip Code 10522   |
| FEC ID number of contributing federal political committee. C  |                                      |  |
| Name of Employer<br>None  | Occupation<br>Retired                |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>25000.00 |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 30500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |          |

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

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

FOR LINE NUMBER: PAGE 11 OF 71  
(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 (Last, First, Middle Initial)  
**A. Leigh Merinoff**

Mailing Address 317 Massachusetts Avenue

City State Zip Code  
Haworth NJ 07641

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

Name of Employer Occupation  
None Homemaker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2014  
**Transaction ID : A2014-2297160**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. Mr. Michael A Newton**

Mailing Address 2830 NW Savier Street

City State Zip Code  
Portland OR 97210

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

Name of Employer Occupation  
Nike, Inc. Principal

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 24 / 2014  
**Transaction ID : A2014-2297161**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. Susan Newton**

Mailing Address 50 Central Park W, #5C

City State Zip Code  
New York NY 10023-6006

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

Name of Employer Occupation  
None Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2014  
**Transaction ID : A2014-2297163**

Amount of Each Receipt this Period  
10000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11500.00

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

**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 12 OF 71 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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 Votes**

**A. Ms. Paula O'Brien**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 463 Camino Manzano  
 City Santa Fe State NM Zip Code 87505-2833  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2297164**  
 Amount of Each Receipt this Period  
 100000.00

**B. Planned Parenthood Action Fund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 434 West 33rd Street  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Planned Parenthood Action Fund Occupation N/A  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 37683.99

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : A2014-2320408**  
 Amount of Each Receipt this Period  
 334.24  
 In-kind contribution: Value of email list used for 9/11 independent expenditures. See Schedule E

**C. Planned Parenthood Action Fund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 434 West 33rd Street  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Planned Parenthood Action Fund Occupation N/A  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 47213.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : A2014-2310704**  
 Amount of Each Receipt this Period  
 9529.99  
 In-kind contribution: staff time for accounting and FEC compliance

|  |           |
|--|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 109864.23 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |           |

**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 13 OF 71   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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

**A. Ms. Carrie Rhodes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5600 NE Windermere Road  
 City Seattle State WA Zip Code 98105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self - Employed Occupation Breeder  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **10000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2014  
**Transaction ID : A2014-2297165**  
 Amount of Each Receipt this Period  
**10000.00**

**B. Ms. Deborah Stein Sharpe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15 Historical Way  
 City Canton State MA Zip Code 02021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Steinsharpe LLC Occupation Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **20000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2014  
**Transaction ID : A2014-2297166**  
 Amount of Each Receipt this Period  
**20000.00**

**C. George Soros**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1060 Fifth Avenue #78-A  
 City New York State NY Zip Code 10128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Soros Fund Management Occupation Finance  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2297167**  
 Amount of Each Receipt this Period  
**500000.00**

|  |                  |
|--|------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>530000.00</b> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |                  |

**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 14 OF 71                |
|   | <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 Votes**

**A. Laurie Tisch**  
Full Name (Last, First, Middle Initial)

Mailing Address 156 W 56th Street #2001

City New York State NY Zip Code 10019

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
09 / 16 / 2014  
**Transaction ID : A2014-2297168**

Amount of Each Receipt this Period  
25000.00

**B. Urvashi M Vaid**  
Full Name (Last, First, Middle Initial)

Mailing Address 230 West End Avenue, Apt. #10C

City New York State NY Zip Code 10023

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

Name of Employer Columbia Law School Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
09 / 23 / 2014  
**Transaction ID : A2014-2297169**

Amount of Each Receipt this Period  
1000.00

**C. Teresa Vanduyn**  
Full Name (Last, First, Middle Initial)

Mailing Address 27 Bushee Road

City Asheville State NC Zip Code 28803

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
09 / 18 / 2014  
**Transaction ID : A2014-2297170**

Amount of Each Receipt this Period  
500.00

|  |            |
|--|------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 26500.00   |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 2073864.23 |

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

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

FOR LINE NUMBER: PAGE 15 OF 71  
(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**

**A. Planned Parenthood Action Fund Inc.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 434 West 33rd Street  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1229.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2014  
**Transaction ID : A2014-13664**  
 Amount of Each Receipt this Period  
 1229.00  
 Reimbursement for 8/20 payment made in error to Premiere Global Services

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 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

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 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

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 1229.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 1229.00 |

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Votes Northwest**

Mailing Address 2001 East Madison Street

City State Zip Code  
Seattle WA 98122

Purpose of Disbursement  
Advance payment for Independent Expenditure activity

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

/  /

**Transaction ID : B536760**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. American Express Merchant Services**

Mailing Address P.O. Box 53852

City State Zip Code  
Phoenix AZ 85072

Purpose of Disbursement  
Credit card fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

/  /

**Transaction ID : B536464**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Stone's Phones, Inc.**

Mailing Address 41-750 Rancho Las Palmas Dr #E-3

City State Zip Code  
Rancho Mirage CA 92270

Purpose of Disbursement  
Phone survey

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

/  /

**Transaction ID : B536467**

Amount of Each Disbursement this Period

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

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Votes**

Full Name (Last, First, Middle Initial)

**A. Community Outreach Group LLC**

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
In-kind: Independent Expenditure for Hagan. See Schedule E

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

**Transaction ID : B511024**

Amount of Each Disbursement this Period

Draw down on advance to COG reported on line 21b of the 2014 FEC August Monthly report

Full Name (Last, First, Middle Initial)

**B. Community Outreach Group LLC**

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
In-kind: Independent Expenditure for Hagan. See Schedule E

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

**Transaction ID : B511026**

Amount of Each Disbursement this Period

Draw down on advance to COG reported on line 21b of the 2014 FEC August Monthly report

Full Name (Last, First, Middle Initial)

**C. Community Outreach Group LLC**

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
In-kind: Independent Expenditure for Hagan. See Schedule E

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

**Transaction ID : B511027**

Amount of Each Disbursement this Period

Draw down on advance to COG reported on line 21b of the 2014 FEC August Monthly report

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

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Votes**

Full Name (Last, First, Middle Initial)

**A. Community Outreach Group LLC**

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
In-kind: Independent Expenditure for Hagan. See Schedule E

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2014

**Transaction ID : B511028**

Amount of Each Disbursement this Period

-5647.75

Draw down on advance to COG reported on line 21b of the 2014 FEC August Monthly report

Full Name (Last, First, Middle Initial)

**B. Beehive Research**

Mailing Address 617 Pickford Place NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Operating expense - research

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

**Transaction ID : B536673**

Amount of Each Disbursement this Period

2314.30

Full Name (Last, First, Middle Initial)

**C. Waterfront Strategies**

Mailing Address 3050 K Street Suite 100

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Payment for October Independent Expenditure activity

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2014

**Transaction ID : B536465**

Amount of Each Disbursement this Period

493715.00

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

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

490381.55

**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"/> 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 Votes**

Full Name (Last, First, Middle Initial)

**A. Community Outreach Group LLC**

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
In-kind: Independent Expenditure for Begich. See Schedule E

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

/  /

**Transaction ID : B536632**

Amount of Each Disbursement this Period

Draw down on advance to COG reported on line 21b of the 2014 FEC September Monthly report

Full Name (Last, First, Middle Initial)

**B. Community Outreach Group LLC**

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
In-kind: Independent Expenditure for Sullivan. See Schedule E

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

/  /

**Transaction ID : B536635**

Amount of Each Disbursement this Period

Draw down on advance to COG reported on line 21b of the 2014 FEC September Monthly report

Full Name (Last, First, Middle Initial)

**C. Analyst Institute LLC**

Mailing Address 815 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Operating expense - research

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

/  /

**Transaction ID : B536470**

Amount of Each Disbursement this Period

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

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Votes**

Full Name (Last, First, Middle Initial)

**A. 76 Words**

Mailing Address 1806 Vernon St, NW #100

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Fundraising expense - Donor presentation

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

**Transaction ID : B536461**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Community Outreach Group LLC**

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Additional payment for 9/12 Sullivan IE. See Schedule E.

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

**Transaction ID : B536638**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Community Outreach Group LLC**

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Advance payment for independent expenditures

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

**Transaction ID : B536643**

Amount of Each Disbursement this Period

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

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Votes**

Full Name (Last, First, Middle Initial)

**A. Community Outreach Group LLC**

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Advance payment for independent expenditures

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2014

Transaction ID : B536644

Amount of Each Disbursement this Period

229906.05

Full Name (Last, First, Middle Initial)

**B. SWAY**

Mailing Address 4311 Leland Street

City Chevy Chase State MD Zip Code 20815

Purpose of Disbursement  
Advance payment for Independent Expenditures

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2014

Transaction ID : B536681

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

**C. SWAY**

Mailing Address 4311 Leland Street

City Chevy Chase State MD Zip Code 20815

Purpose of Disbursement  
Partial payment for 9/15 Independent Expenditure opposing Ernst. See Schedule F

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2014

Transaction ID : B536759

Amount of Each Disbursement this Period

12504.48

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

267410.53

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Health Systems Action Fund**

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement  
In-kind: Independent Expenditure for Hagan. See Schedule E

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)  Not Applicable

State: District:

Date of Disbursement

/  /

**Transaction ID : B511014**

Amount of Each Disbursement this Period

Draw down on advance to PPHS-AF reported on line 21b of the 2014 FEC July Monthly report

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Health Systems Action Fund**

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement  
In-kind: Independent Expenditure for Hagan. See Schedule E

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)  Not Applicable

State: District:

Date of Disbursement

/  /

**Transaction ID : B511015**

Amount of Each Disbursement this Period

Draw down on advance to PPHS-AF reported on line 21b of the 2014 FEC July Monthly report

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Health Systems Action Fund**

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement  
In-kind: Independent Expenditure for Hagan. See Schedule E

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)  Not Applicable

State: District:

Date of Disbursement

/  /

**Transaction ID : B511016**

Amount of Each Disbursement this Period

Draw down on advance to PPHS-AF reported on line 21b of the 2014 FEC July Monthly report

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

**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 Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Health Systems Action Fund**

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement  
In-kind: Independent Expenditure for Hagan. See Schedule E

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2014

Transaction ID : B511017

Amount of Each Disbursement this Period

-1325.00

Draw down on advance to PPHS-AF reported on line 21b of the 2014 FEC July Monthly report

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
In-kind contribution of predictive dialer minutes to PP TX Votes PAC (non-federal TX PAC)

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

Transaction ID : B536713

Amount of Each Disbursement this Period

-5500.00

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of Wendy Davis, Gov candidate in TX

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2014

Transaction ID : B536716

Amount of Each Disbursement this Period

-450.28

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

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

-7275.28

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of L Van de Putte, Lt Gov  
Candidate Name

**001**  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify)  Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2014

**Transaction ID : B536719**

Amount of Each Disbursement this Period

-385.32

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of Leigh Bailey, TX State House  
Candidate Name

**001**  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify)  Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2014

**Transaction ID : B536728**

Amount of Each Disbursement this Period

-217.56

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of PP TX Votes PAC (non-federal  
TX PAC)  
Candidate Name

**001**  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify)  Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2014

**Transaction ID : B536730**

Amount of Each Disbursement this Period

-6412.63

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

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

-7015.51

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of PP Pennsylvania PAC (non-federal PA PAC)  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2014

**Transaction ID : B532437**

Amount of Each Disbursement this Period

-1810.81

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
In-kind contrib. of staff travel expenses in support of PP Pennsylvania PAC (non-federal PA PAC)  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2014

**Transaction ID : B532439**

Amount of Each Disbursement this Period

-1195.19

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
In-kind contribution of staff travel expenses in support of PP TX Votes PAC (non-federal TX PAC)  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

**Transaction ID : B536732**

Amount of Each Disbursement this Period

-238.46

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

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

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

-3244.46

**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"/> 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 Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement In-kind contrib. of staff travel expenses in support of PP Pennsylvania PAC  
(non-federal PA PAC)  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2014

**Transaction ID : B532441**

Amount of Each Disbursement this Period

-174.90

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement In-kind contrib. of website and social media advocacy tools for Wendy Davis, Gov candidate in TX  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2014

**Transaction ID : B536734**

Amount of Each Disbursement this Period

-3826.58

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement In-kind contrib. of website and social media advocacy tools for Tom Wolf, Gov candidate in PA  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2014

**Transaction ID : B536736**

Amount of Each Disbursement this Period

-886.09

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

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

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

-4887.57

**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"/> 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 Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Action Fund Inc.**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
Staff time for fundraising. See Schedule D

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 20 / 2014

**Transaction ID : B536746**

Amount of Each Disbursement this Period

21257.27 12031.61

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund Inc.**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
Payment for debt originally reported on Sep Monthly Rpt. See Schedule D

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : B532110**

Amount of Each Disbursement this Period

11727.28

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Fund Inc.**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
In-kind contribution: staff time for accounting and FEC compliance

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : B536656**

Amount of Each Disbursement this Period

9529.99

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

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

21257.27

**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 Votes**

Full Name (Last, First, Middle Initial)

**A. Blackbaud Inc.**

Mailing Address 2000 Daniel Island Drive

City Charleston State SC Zip Code 29492

Purpose of Disbursement  
Credit card fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2014

Transaction ID : B536455

Amount of Each Disbursement this Period

403.47

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address P.O. Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement  
Merchant fees

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2014

Transaction ID : B536463

Amount of Each Disbursement this Period

45.29

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period

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

448.76

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

714150.00

**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 Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Voters of Iowa PAC**

Mailing Address 1171 7th St

City Des Moines State IA Zip Code 50322

Purpose of Disbursement  
Contribution to non-federal IA PAC

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : B536655**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of PP Pennsylvania PAC (non-federal PA PAC)

Candidate Name  
**PP Pennsylvania PAC**

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : B532436**

Amount of Each Disbursement this Period

See line 21b

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
In-kind contrib. of staff travel expenses in support of PP Pennsylvania PAC (non-federal PA PAC)

Candidate Name  
**PP Pennsylvania PAC**

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : B532438**

Amount of Each Disbursement this Period

See line 21b

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

**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)

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contrib. of staff travel expenses in support of PP Pennsylvania PAC  
(non-federal PA PAC)  
Candidate Name

**PP Pennsylvania PAC**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Not Applicable**

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 4 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B532440**

Amount of Each Disbursement this Period

|   |   |   |   |
|---|---|---|---|
| 1 | 7 | 4 | 9 |
|---|---|---|---|

See line 21b

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contrib. of website and social media advocacy tools for Tom Wolf, Gov  
candidate in PA  
Candidate Name

**Tom Wolf**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Not Applicable**

State: PA District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 6 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B536737**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 2 | 9 | 4 | 0 | 4 | 9 |
|---|---|---|---|---|---|

**[MEMO ITEM]**  
See schedule D

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contrib. of website and social media advocacy tools for Tom Wolf, Gov  
candidate in PA  
Candidate Name

**Tom Wolf**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Not Applicable**

State: PA District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 6 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B536735**

Amount of Each Disbursement this Period

|   |   |   |   |   |
|---|---|---|---|---|
| 8 | 8 | 6 | 0 | 9 |
|---|---|---|---|---|

See line 21b

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

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

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 0 | 6 | 0 | 9 |
|---|---|---|---|---|

|  |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
|--|--|--|--|--|

**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"/> 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 Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of PP Pennsylvania PAC (non-federal PA PAC)  
Candidate Name

**PP Pennsylvania PAC**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 20 / 2014

**Transaction ID : B536738**

Amount of Each Disbursement this Period

1320.73

**[MEMO ITEM]**  
See schedule D

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Pennsylvania PAC**

Mailing Address 1514 N 2nd Street

City State Zip Code  
Harrisburg PA 17102

Purpose of Disbursement  
Contribution to non-federal PA PAC

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

**Transaction ID : B536628**

Amount of Each Disbursement this Period

200000.00

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contribution of predictive dialer minutes to PP TX Votes PAC (non-federal TX PAC)  
Candidate Name

**PP TX Votes PAC**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

**Transaction ID : B536712**

Amount of Each Disbursement this Period

5500.00

See line 21b

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

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

205500.00

**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)

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 Votes**

Full Name (Last, First, Middle Initial)

**A. Beehive Research**

Mailing Address 617 Pickford Place NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Payment for February in-kind contribution of research for Wendy Davis, Gov candidate in TX

Candidate Name  
**Wendy Davis**

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

State: TX District:

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

**Transaction ID : B536462**

Amount of Each Disbursement this Period

1800.00

**B. Planned Parenthood Action Fund**

Full Name (Last, First, Middle Initial)

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of PP TX Votes PAC (non-federal TX PAC)

Candidate Name  
**PP TX Votes PAC**

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2014

**Transaction ID : B536729**

Amount of Each Disbursement this Period

6412.63

See line 21b

**C. Planned Parenthood Action Fund**

Full Name (Last, First, Middle Initial)

Mailing Address 434 West 33rd Street

City New York State NY Zip Code 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of Leigh Bailey, TX State House candidate

Candidate Name  
**Leigh Bailey**

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify) ▼

State: TX District: 10

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2014

**Transaction ID : B536727**

Amount of Each Disbursement this Period

217.56

See line 21b

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

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

8430.19



**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)

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of Wendy Davis, Gov candidate in TX

Candidate Name

**Wendy Davis**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District:

011

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 06 / 2014

**Transaction ID : B536715**

Amount of Each Disbursement this Period

450.28

See line 21b

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of L Van de Putte, Lt Gov candidate in TX

Candidate Name

**Leticia Van de Putte**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District:

011

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 06 / 2014

**Transaction ID : B536718**

Amount of Each Disbursement this Period

385.32

See line 21b

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contribution of staff travel expenses in support of PP TX Votes PAC (non-federal TX PAC)

Candidate Name

**PP TX Votes PAC**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

011

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 12 / 2014

**Transaction ID : B536731**

Amount of Each Disbursement this Period

238.46

See line 21b

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

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

1074.06

**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"/> 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 Votes**

Full Name (Last, First, Middle Initial)

**A. Blueprint Interactive**

Mailing Address 2229 North Pollard St

City State Zip Code  
Arlington VA 22207

Purpose of Disbursement  
Payment for debt previously reported on August monthly report. See  
Schedule D

Candidate Name

**Wendy Davis**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 2 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B509617**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 1 | 3 | 2 | 0 | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contrib. of website and social media advocacy tools for Wendy Davis,  
Gov candidate in TX

Candidate Name

**Wendy Davis**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 6 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B536733**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 3 | 8 | 2 | 6 | 5 | 8 |
|---|---|---|---|---|---|

See line 21b

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of PP TX Votes PAC (non-federal  
TX PAC)

Candidate Name

**PP TX Votes PAC**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 0 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B536742**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 8 | 1 | 0 | 8 | 4 | 7 |
|---|---|---|---|---|---|

**[MEMO ITEM]**  
See schedule D

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

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

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| 1 | 7 | 0 | 2 | 6 | 5 | 8 |
|---|---|---|---|---|---|---|

|  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|

**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"/> 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 Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of Leigh Bailey, TX State House candidate

Candidate Name  
**Leigh Bailey**

Office Sought:  House  
 Senate  
 President  
State: TX District: 10

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : B536741**

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
See schedule D

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of Wendy Davis, Gov candidate in TX

Candidate Name  
**Wendy Davis**

Office Sought:  House  
 Senate  
 President  
State: TX District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : B536739**

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
See schedule D

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contribution of staff time in support of L Van de Putte, Lt Gov candidate in TX

Candidate Name  
**Leticia Van de Putte**

Office Sought:  House  
 Senate  
 President  
State: TX District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : B536740**

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
See schedule D

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

**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)

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 Votes**

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contribution of list rental for fundraiser invite for PP TX Votes PAC  
(non-federal TX PAC)

Candidate Name  
**PP TX Votes PAC**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 6 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B536743**

Amount of Each Disbursement this Period

|   |   |   |   |
|---|---|---|---|
| 1 | 2 | . | 6 |
|---|---|---|---|

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Action Fund**

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

Purpose of Disbursement  
In-kind contribution of list rental for fundraiser invite for PP TX Votes PAC  
(non-federal TX PAC)

Candidate Name  
**PP TX Votes PAC**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 1 | 4 |

**Transaction ID : B536744**

Amount of Each Disbursement this Period

|   |   |   |
|---|---|---|
| 4 | . | 6 |
|---|---|---|

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

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 |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Disbursement this Period

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

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

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

|   |   |   |
|---|---|---|
| 0 | . | 0 |
|---|---|---|

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| 2 | 8 | 6 | 0 | 9 | 7 | . | 8 |
|---|---|---|---|---|---|---|---|

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 37 OF 71   |
|   | 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<br><b>MackCrouse Group</b> | Nature of Debt (Purpose):<br>Canvass literature |
| Mailing Address 2001 N. Beauregard St. Ste 420  |   |
| City State Zip Code<br>Alexandria VA 22311  |   |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>3950.00 | <b>Transaction ID : D439006</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>3950.00 |

|  |  |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Planned Parenthood Action Fund Inc.</b> | Nature of Debt (Purpose):<br>Staff time for fundraising efforts and non-federal in-kind activity. See lines 21b, 29 & Schedule E |
| Mailing Address 434 West 33rd Street   |  |
| City State Zip Code<br>New York NY 10001   |  |

|   |                                 |   |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period<br>16817.55 | <b>Transaction ID : D539006</b> |   |
| Amount Incurred This Period<br>28408.30               | Payment This Period<br>16817.55 | Outstanding Balance at Close of This Period<br>28408.30 |

|  |   |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>FedEx</b> | Nature of Debt (Purpose):<br>Shipping of invitations for fundraiser |
| Mailing Address 326 7th Avenue   |   |
| City State Zip Code<br>New York NY 10001   |   |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>21.04 | <b>Transaction ID : D739009</b> |  |
| Amount Incurred This Period<br>0.00                | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>21.04 |

|  |          |
|--|----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | 32379.34 |
| 2) <b>TOTALS</b> This Period (last page this line number only)..... ▶                            |          |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶                       |          |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ |          |

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 38 OF 71   |
|   | 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<br><b>PPCNC Action Fund</b> | Nature of Debt (Purpose):<br>Postage of invitations for fundraiser. |
| Mailing Address PO Box 9194  |   |
| City State Zip Code<br>Chapel Hill NC 27515  |   |

|   |                                 |   |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period<br>200.00 | <b>Transaction ID : D739010</b> |   |
| Amount Incurred This Period<br>0.00                 | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>200.00 |

|   |   |
|---|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>76 Words</b> | Nature of Debt (Purpose):<br>Production of advertisement. |
| Mailing Address 1720 Eye Street NW, Ste 550   |   |
| City State Zip Code<br>Washington DC 20006  |   |

|   |                                 |   |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period<br>25200.00 | <b>Transaction ID : D739012</b> |   |
| Amount Incurred This Period<br>0.00                   | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>25200.00 |

|  |   |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Blueprint Interactive</b> | Nature of Debt (Purpose):<br>Online advertising. See line 29 and Schedule E |
| Mailing Address 2229 North Pollard St  |   |
| City State Zip Code<br>Arlington VA 22207  |   |

|   |                                 |   |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period<br>18210.00 | <b>Transaction ID : D739013</b> |   |
| Amount Incurred This Period<br>0.00                   | Payment This Period<br>18210.00 | Outstanding Balance at Close of This Period<br>0.00 |

|  |          |
|--|----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | 25400.00 |
| 2) <b>TOTALS</b> This Period (last page this line number only)..... ▶                            |          |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶                       |          |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ |          |

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 39 OF 71   |
|   | 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<br><b>Work for Progress</b> | Nature of Debt (Purpose):<br>Distribution of canvass literature. See Schedule E |
| Mailing Address 1543 Wazee Street, 4th Floor   |   |
| City State Zip Code<br>Denver CO 80202   |   |

|  |  |   |
|--|--|---|
| Outstanding Balance Beginning This Period<br><input type="text" value="24300.00"/> | <b>Transaction ID : D739014</b>                              |   |
| Amount Incurred This Period<br><input type="text" value="329775.30"/>              | Payment This Period<br><input type="text" value="24300.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="329775.30"/> |

|  |  |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Analyst Institute LLC</b> | Nature of Debt (Purpose):<br>Testing of online ads. See Schedule E |
| Mailing Address 815 16th Street, NW  |  |
| City State Zip Code<br>Washington DC 20006   |  |

|   |   |  |
|---|---|--|
| Outstanding Balance Beginning This Period<br><input type="text" value="5000.00"/> | <b>Transaction ID : D739015</b>                             |  |
| Amount Incurred This Period<br><input type="text" value="0.00"/>                  | Payment This Period<br><input type="text" value="5000.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="0.00"/> |

|   |   |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>The Feldman Group Inc.</b> | Nature of Debt (Purpose):<br>Messaging research. See Schedule E |
| Mailing Address 508-510 8th St. SE  |   |
| City State Zip Code<br>Washington DC 20003  |   |

|  |  |  |
|--|--|--|
| Outstanding Balance Beginning This Period<br><input type="text" value="31000.00"/> | <b>Transaction ID : D739016</b>                              |  |
| Amount Incurred This Period<br><input type="text" value="0.00"/>                   | Payment This Period<br><input type="text" value="31000.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="0.00"/> |

|  |  |
|--|--|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | <input type="text" value="329775.30"/> |
| 2) <b>TOTALS</b> This Period (last page this line number only)..... ▶                            | <input type="text"/>                   |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶                       | <input type="text"/>                   |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text"/>                   |

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 40 OF 71   |
|   | 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<br><b>Rising Tide Interactive</b> | Nature of Debt (Purpose):<br>Online advertising. See Schedule E |
| Mailing Address 901 New York Ave NW #470 East  |   |
| City State Zip Code<br>Washington DC 20001   |   |

|   |                                 |   |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period<br>14457.75 | <b>Transaction ID : D739017</b> |   |
| Amount Incurred This Period<br>0.00                   | Payment This Period<br>14457.75 | Outstanding Balance at Close of This Period<br>0.00 |

|  |   |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>The Pivot Group</b> | Nature of Debt (Purpose):<br>Printing of canvass literature |
| Mailing Address 1701 I Street NW Ste 550   |   |
| City State Zip Code<br>Washington DC 20005   |   |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>2770.00 | <b>Transaction ID : D739018</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>2770.00 |

|   |   |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Beehive Research</b> | Nature of Debt (Purpose):<br>Research. See Schedule E |
| Mailing Address 617 Pickford Place NE   |   |
| City State Zip Code<br>Washington DC 20002  |   |

|   |                                 |  |
|---|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>0.00 | <b>Transaction ID : D739019</b> |  |
| Amount Incurred This Period<br>1542.50            | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>1542.50 |

|  |         |
|--|---------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | 4312.50 |
| 2) <b>TOTALS</b> This Period (last page this line number only)..... ▶                            |         |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶                       |         |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ |         |



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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 41 OF 71   |
|   | 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<br><b>Community Outreach Group LLC</b> | Nature of Debt (Purpose):<br>Paid canvass - persuasion & GOTV. See Schedule E |
| Mailing Address 1110 Vermont Ave N.W. #300  |   |
| City State Zip Code<br>Washington DC 20005  |   |

|   |                                 |  |
|---|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>0.00 | <b>Transaction ID : D739020</b> |  |
| Amount Incurred This Period<br>498343.06          | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>498343.06 |

|  |   |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Moxie Media Inc</b> | Nature of Debt (Purpose):<br>Printing of canvass literature. See Schedule E |
| Mailing Address 2021 Minor Ave East  |   |
| City State Zip Code<br>Seattle WA 99102  |   |

|   |                                 |  |
|---|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>0.00 | <b>Transaction ID : D739021</b> |  |
| Amount Incurred This Period<br>5500.00            | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>5500.00 |

|   |   |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>The Strategy Group</b> | Nature of Debt (Purpose):<br>Printing of canvass literature. See Schedule E |
| Mailing Address 1606 20th Street NW Floor 3   |   |
| City State Zip Code<br>Washington DC 20009  |   |

|   |                                 |   |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period<br>0.00 | <b>Transaction ID : D739022</b> |   |
| Amount Incurred This Period<br>26228.50           | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>26228.50 |

|  |           |
|--|-----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | 530071.56 |
| 2) <b>TOTALS</b> This Period (last page this line number only)..... ▶                            |           |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶                       |           |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ |           |

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 42 OF 71   |
|   | 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<br><b>SWAY</b> | Nature of Debt (Purpose):<br>Production and commission of broadcast advertisement. See Schedule E |
| Mailing Address 4311 Leland Street  |   |
| City State Zip Code<br>Chevy Chase MD 20815                                     |   |

|   |                                 |   |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period<br>0.00 | <b>Transaction ID : D739023</b> |   |
| Amount Incurred This Period<br>57839.48           | Payment This Period<br>12504.48 | Outstanding Balance at Close of This Period<br>45335.00 |

|  |                           |
|--|---------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): |
| Mailing Address  |                           |
| City State Zip Code  |                           |

|   |                     |   |
|---|---------------------|---|
| Outstanding Balance Beginning This Period |                     |   |
| Amount Incurred This Period               | Payment This Period | Outstanding Balance at Close of This Period |

|  |                           |
|--|---------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): |
| Mailing Address  |                           |
| City State Zip Code  |                           |

|   |                     |   |
|---|---------------------|---|
| Outstanding Balance Beginning This Period |                     |   |
| Amount Incurred This Period               | Payment This Period | Outstanding Balance at Close of This Period |

|  |           |
|--|-----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | 45335.00  |
| 2) <b>TOTALS</b> This Period (last page this line number only)..... ▶                            | 967273.70 |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶                       | 0.00      |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ | 967273.70 |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee: Planned Parenthood Votes Northwest
Mailing Address: 2001 East Madison Street
City: Seattle, State: WA, Zip Code: 98122
Purpose of Expenditure: Persuasion phone banks
Category/Type: 004
Date of Public Distribution/Dissemination: 09/02/2014
Amount: 3795.00
Transaction ID: B511264
Date of Disbursement or Obligation: 09/22/2014
Name of Federal Candidate: Mark Begich
Support: [X] Support, [ ] Oppose
Office Sought: [ ] House, [X] Senate, State: AK
Calendar Year-To-Date Per Election for Office Sought: 227912.84
Disbursement For: [ ] Primary, [X] General, [ ] Other (specify)

Full Name of Payee: Planned Parenthood Votes Northwest
Mailing Address: 2001 East Madison Street
City: Seattle, State: WA, Zip Code: 98122
Purpose of Expenditure: Persuasion canvasses
Category/Type: 004
Date of Public Distribution/Dissemination: 09/02/2014
Amount: 3450.00
Transaction ID: B511265
Date of Disbursement or Obligation: 09/22/2014
Name of Federal Candidate: Mark Begich
Support: [X] Support, [ ] Oppose
Office Sought: [ ] House, [X] Senate, State: AK
Calendar Year-To-Date Per Election for Office Sought: 227912.84
Disbursement For: [ ] Primary, [X] General, [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 7245.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(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.
Signature: Liz Gustafson
[Electronically Filed]
Date: 03/04/2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Planned Parenthood Votes Northwest
Mailing Address
2001 East Madison Street
City
Seattle State
WA Zip Code
98122
Date of Public Distribution/Dissemination
09 / 02 / 2014
Amount
4255.00
Transaction ID : B511263
Date of Disbursement or Obligation
09 / 22 / 2014
Purpose of Expenditure
Volunteer recruitment phone banks
Category/Type
004
Name of Federal Candidate
Mark Begich
Support
Office Sought:
Senate State: AK
Calendar Year-To-Date
Per Election for Office Sought
227912.84
Disbursement For:
General 2014

Full Name of Payee
Community Outreach Group LLC
Mailing Address
1110 Vermont Ave N.W. #300
City
Washington State
DC Zip Code
20005
Date of Public Distribution/Dissemination
09 / 12 / 2014
Amount
105456.42
Transaction ID : B528491
Date of Disbursement or Obligation
09 / 12 / 2014
Purpose of Expenditure
Paid canvass - persuasion & GOTV
Category/Type
004
Name of Federal Candidate
Mark Begich
Support
Office Sought:
Senate State: AK
Calendar Year-To-Date
Per Election for Office Sought
227912.84
Disbursement For:
General 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 109711.42
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(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.
Liz Gustafson
[Electronically Filed]
Date 03 / 04 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Community Outreach Group LLC
Mailing Address
1110 Vermont Ave N.W. #300
City
Washington State
DC Zip Code
20005
Purpose of Expenditure
Paid canvass - persuasion & GOTV
Category/Type
004
Date of Public Distribution/Dissemination
09 / 12 / 2014
Amount
105456.42
Transaction ID : B528492
Date of Disbursement or Obligation
09 / 12 / 2014
Name of Federal Candidate
Dan Sullivan
Support
Oppose
Office Sought:
House
Senate
State: AK
Calendar Year-To-Date
Per Election for Office Sought
227912.84
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Moxie Media Inc
MEMO ITEM
Mailing Address
2021 Minor Ave East
City
Seattle State
WA Zip Code
99102
Purpose of Expenditure
Printing of canvass literature. See Schedule D
Category/Type
004
Date of Public Distribution/Dissemination
09 / 15 / 2014
Amount
2750.00
Transaction ID : B534701
Date of Disbursement or Obligation
09 / 15 / 2014
Name of Federal Candidate
Mark Begich
Support
Oppose
Office Sought:
House
Senate
State: AK
Calendar Year-To-Date
Per Election for Office Sought
227912.84
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 105456.42
(b) SUBTOTAL of Unitemized Independent Expenditures
(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.
Liz Gustafson
[Electronically Filed]
Date 03 / 04 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Moxie Media Inc
MEMO ITEM
Mailing Address
2021 Minor Ave East
City
Seattle State
WA Zip Code
99102
Purpose of Expenditure
Printing of canvass literature. See Schedule D
Category/Type
004
Name of Federal Candidate
Dan Sullivan
Support
Oppose
Office Sought:
House
Senate
State:
AK
Calendar Year-To-Date
Per Election for Office Sought
227912.84

Date of Public Distribution/Dissemination
09 / 15 / 2014
Amount
2750.00
Transaction ID : B534702
Date of Disbursement or Obligation
09 / 15 / 2014
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Blueprint Interactive
Mailing Address
2229 North Pollard St
City
Arlington State
VA Zip Code
22207
Purpose of Expenditure
Payment for independent expenditure originally reported on
July Monthly Rpt. See Schedule D.
Category/Type
004
Name of Federal Candidate
Cory Gardner
Support
Oppose
Office Sought:
House
Senate
State:
CO
Calendar Year-To-Date
Per Election for Office Sought
832188.44

Date of Public Distribution/Dissemination
06 / 19 / 2014
Amount
5010.00
Transaction ID : B499104
Date of Disbursement or Obligation
09 / 12 / 2014
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 5010.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(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.
Liz Gustafson
[Electronically Filed]
Date 03 / 04 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Screen Strategies Media
Mailing Address
2940 Stella Blue Lane
City
Fairfax State
VA Zip Code
22031
Purpose of Expenditure
TV/cable advertising buy
Category/Type
004
Name of Federal Candidate
Cory Gardner
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
832188.44

Date of Public Distribution/Dissemination
09 / 12 / 2014
Amount
13500.00
Transaction ID : B528494
Date of Disbursement or Obligation
09 / 10 / 2014
Office Sought:
House
Senate
State: CO
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
76 Words
Mailing Address
1720 Eye Street NW, Ste 550
City
Washington State
DC Zip Code
20006
Purpose of Expenditure
Production of broadcast advertisement
Category/Type
004
Name of Federal Candidate
Cory Gardner
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
832188.44

Date of Public Distribution/Dissemination
09 / 12 / 2014
Amount
9530.56
Transaction ID : B528496
Date of Disbursement or Obligation
09 / 12 / 2014
Office Sought:
House
Senate
State: CO
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 23030.56
(b) SUBTOTAL of Unitemized Independent Expenditures
(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.
Liz Gustafson
[Electronically Filed]
Date 03 / 04 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Work for Progress
Mailing Address
1543 Wazee Street, 4th Floor
City
Denver State
CO Zip Code
80202
Purpose of Expenditure
Payment for independent expenditure originally reported on
Sep Monthly Rpt. See Schedule D.
Category/
Type
004
Name of Federal Candidate
Mark Udall
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
832188.44

Date of Public Distribution/Dissemination
08 / 23 / 2014
Amount
12150.00
Transaction ID : B510743
Date of Disbursement or Obligation
09 / 16 / 2014
Office Sought:
House
Senate
State: CO
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Work for Progress
Mailing Address
1543 Wazee Street, 4th Floor
City
Denver State
CO Zip Code
80202
Purpose of Expenditure
Payment for independent expenditure originally reported on
Sep Monthly Rpt. See Schedule D.
Category/
Type
004
Name of Federal Candidate
Cory Gardner
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
832188.44

Date of Public Distribution/Dissemination
08 / 23 / 2014
Amount
12150.00
Transaction ID : B510744
Date of Disbursement or Obligation
09 / 16 / 2014
Office Sought:
House
Senate
State: CO
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 24300.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(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.
Liz Gustafson
[Electronically Filed]
Date
03 / 04 / 2015
Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Work for Progress
MEMO ITEM
Mailing Address
1543 Wazee Street, 4th Floor
City
Denver State
CO Zip Code
80202
Purpose of Expenditure
Distribution of canvass literature. See Schedule D
Category/Type
004
Name of Federal Candidate
Mark Udall
Support
Oppose
Office Sought:
House
Senate
State:
CO
Calendar Year-To-Date
Per Election for Office Sought
832188.44

Date of Public Distribution/Dissemination
09 / 22 / 2014
Amount
56022.00
Transaction ID : B532993
Date of Disbursement or Obligation
09 / 22 / 2014
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Work for Progress
MEMO ITEM
Mailing Address
1543 Wazee Street, 4th Floor
City
Denver State
CO Zip Code
80202
Purpose of Expenditure
Distribution of canvass literature. See Sechedule D
Category/Type
004
Name of Federal Candidate
Cory Gardner
Support
Oppose
Office Sought:
House
Senate
State:
CO
Calendar Year-To-Date
Per Election for Office Sought
832188.44

Date of Public Distribution/Dissemination
09 / 22 / 2014
Amount
56022.00
Transaction ID : B532994
Date of Disbursement or Obligation
09 / 22 / 2014
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(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.
Liz Gustafson
[Electronically Filed]
Date
03 / 04 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
The Strategy Group
MEMO ITEM
Mailing Address 1606 20th Street NW Floor 3
City Washington State DC Zip Code 20009
Purpose of Expenditure Printing of canvass literature. See Schedule D
Category/Type 004
Name of Federal Candidate Mark Udall
Support Oppose
Office Sought: House Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 832188.44

Date of Public Distribution/Dissemination 09/28/2014
Amount 13114.25
Transaction ID : B534095
Date of Disbursement or Obligation 09/28/2014
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee
The Strategy Group
MEMO ITEM
Mailing Address 1606 20th Street NW Floor 3
City Washington State DC Zip Code 20009
Purpose of Expenditure Printing of canvass literature. See Schedule D
Category/Type 004
Name of Federal Candidate Cory Gardner
Support Oppose
Office Sought: House Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 832188.44

Date of Public Distribution/Dissemination 09/28/2014
Amount 13114.25
Transaction ID : B534096
Date of Disbursement or Obligation 09/28/2014
Disbursement For: Primary General 2014 Other (specify)

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

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Liz Gustafson [Electronically Filed] Date 03/04/2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Work for Progress
MEMO ITEM
Mailing Address
1543 Wazee Street, 4th Floor
City
Denver State
CO Zip Code
80202
Purpose of Expenditure
Distribution of canvass literature. Correction of amount previously rptd on 9/30/14. See Schedule D
Category/Type
004

Date of Public Distribution/Dissemination
09 / 28 / 2014
Amount
108865.65
Transaction ID : B534097
Date of Disbursement or Obligation
09 / 28 / 2014

Name of Federal Candidate
Mark Udall
Support
Oppose
Office Sought:
House
Senate
State: CO
Calendar Year-To-Date
Per Election for Office Sought
832188.44

Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Work for Progress
MEMO ITEM
Mailing Address
1543 Wazee Street, 4th Floor
City
Denver State
CO Zip Code
80202
Purpose of Expenditure
Distribution of canvass literature. Correction of amount previously rptd on 9/30/14. See Schedule D
Category/Type
004

Date of Public Distribution/Dissemination
09 / 28 / 2014
Amount
108865.65
Transaction ID : B534098
Date of Disbursement or Obligation
09 / 28 / 2014

Name of Federal Candidate
Cory Gardner
Support
Oppose
Office Sought:
House
Senate
State: CO
Calendar Year-To-Date
Per Election for Office Sought
832188.44

Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(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.

Liz Gustafson
[Electronically Filed]
Date
03 / 04 / 2015
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br><b>Planned Parenthood Votes</b>   | <b>FEC IDENTIFICATION NUMBER ▼</b><br><b>C</b> C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> |  |

|   |  |
|---|--|
| Full Name of Payee<br><b>Screen Strategies Media</b>  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 29 / 2014   |
| Mailing Address 11150 Fairfax Blvd, Ste 550   | Amount<br><span style="border: 1px solid black; padding: 2px;">99938.50</span>   |
| City State Zip Code<br>Fairfax VA 22030   | <b>Transaction ID : B534099</b><br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 05 / 2014   |
| Purpose of Expenditure<br>Cable TV buy. Correction to amount previously reported on 9/30                                      | Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>  |
| Name of Federal Candidate<br>Mark Udall   | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____<br><input type="checkbox"/> President State: <u>CO</u> |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">832188.44</span> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014<br><input type="checkbox"/> Other (specify) ▶ _____  |

|   |  |
|---|--|
| Full Name of Payee<br><b>Screen Strategies Media</b>  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 29 / 2014   |
| Mailing Address 11150 Fairfax Blvd, Ste 550   | Amount<br><span style="border: 1px solid black; padding: 2px;">299815.50</span>  |
| City State Zip Code<br>Fairfax VA 22030   | <b>Transaction ID : B534100</b><br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 05 / 2014   |
| Purpose of Expenditure<br>Cable TV buy. Correction to amount previously reported on 9/30                                      | Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>  |
| Name of Federal Candidate<br>Cory Gardner   | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____<br><input type="checkbox"/> President State: <u>CO</u> |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">832188.44</span> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014<br><input type="checkbox"/> Other (specify) ▶ _____  |

|  |   |
|--|---|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <span style="border: 1px solid black; padding: 2px;">399754.00</span> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <span style="border: 1px solid black; padding: 2px;"> </span>         |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <span style="border: 1px solid black; padding: 2px;"> </span>         |

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.

*Liz Gustafson* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 03 / 04 / 2015

Signature \_\_\_\_\_

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
76 Words
Mailing Address
1806 Vernon St, NW #100
City
Washington State
DC Zip Code
20009
Purpose of Expenditure
Production of broadcast advertising
Category/Type
004
Name of Federal Candidate
Mark Udall
Support
Oppose
Office Sought:
House
Senate
State:
CO
Calendar Year-To-Date
Per Election for Office Sought
832188.44

Date of Public Distribution/Dissemination
09 / 29 / 2014
Amount
1525.02
Transaction ID : B534101
Date of Disbursement or Obligation
09 / 30 / 2014
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
76 Words
Mailing Address
1806 Vernon St, NW #100
City
Washington State
DC Zip Code
20009
Purpose of Expenditure
Production of broadcast advertising
Category/Type
004
Name of Federal Candidate
Cory Gardner
Support
Oppose
Office Sought:
House
Senate
State:
CO
Calendar Year-To-Date
Per Election for Office Sought
832188.44

Date of Public Distribution/Dissemination
09 / 29 / 2014
Amount
4575.06
Transaction ID : B534102
Date of Disbursement or Obligation
09 / 30 / 2014
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 6100.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(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.

Liz Gustafson
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Date
03 / 04 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Waterfront Strategies
Mailing Address
3050 K Street Suite 100
City
Washington State
DC Zip Code
20007
Purpose of Expenditure
TV/Cable advertising buy
Category/Type
004
Name of Federal Candidate
Joni Ernst
Support
Oppose
Office Sought:
House
Senate
State: IA
Calendar Year-To-Date
Per Election for Office Sought
511710.48

Date of Public Distribution/Dissemination
09 / 15 / 2014
Amount
450053.00
Transaction ID : B531892
Date of Disbursement or Obligation
09 / 05 / 2014
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
SWAY
MEMO ITEM
Mailing Address
4311 Leland Street
City
Chevy Chase State
MD Zip Code
20815
Purpose of Expenditure
Production and commission of broadcast ad. Correction of amnt rptd on 10/10/14. See Schedule D
Category/Type
004
Name of Federal Candidate
Joni Ernst
Support
Oppose
Office Sought:
House
Senate
State: IA
Calendar Year-To-Date
Per Election for Office Sought
511710.48

Date of Public Distribution/Dissemination
09 / 15 / 2014
Amount
57839.48
Transaction ID : B531894
Date of Disbursement or Obligation
09 / 15 / 2014
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 450053.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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Liz Gustafson
[Electronically Filed]
Date 03 / 04 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Planned Parenthood Voters of Iowa
Mailing Address
1171 7th St
City
Des Moines State
IA Zip Code
50322
Purpose of Expenditure
Production of broadcast advertisement
Category/Type
004
Name of Federal Candidate
Joni Ernst
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
511710.48

Date of Public Distribution/Dissemination
09 / 15 / 2014
Amount
2275.50
Transaction ID : B531896
Date of Disbursement or Obligation
09 / 23 / 2014
Office Sought:
House
Senate
State: IA
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Beehive Research
MEMO ITEM
Mailing Address
617 Pickford Place NE
City
Washington State
DC Zip Code
20002
Purpose of Expenditure
Research. See Schedule D
Category/Type
004
Name of Federal Candidate
Joni Ernst
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
511710.48

Date of Public Distribution/Dissemination
09 / 15 / 2014
Amount
1542.50
Transaction ID : B531899
Date of Disbursement or Obligation
09 / 15 / 2014
Office Sought:
House
Senate
State: IA
Disbursement For:
Primary
General
Other (specify)

Table with 2 columns: Description and Amount. Row (a) SUBTOTAL of Itemized Independent Expenditures: 2275.50. Row (b) SUBTOTAL of Unitemized Independent Expenditures. Row (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.

Signature: Liz Gustafson [Electronically Filed] Date: 03 / 04 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee: Community Outreach Group LLC
Mailing Address: 1110 Vermont Ave N.W. #300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Volunteer recruitment phone banks
Category/Type: 004
Date of Public Distribution/Dissemination: 09/01/2014
Amount: 5647.75
Transaction ID: B510998
Date of Disbursement or Obligation: 09/01/2014
Name of Federal Candidate: Kay Hagan
Support: [X] Oppose: [ ]
Office Sought: [ ] President [X] Senate
State: NC
Calendar Year-To-Date Per Election for Office Sought: 927664.73
Disbursement For: [ ] Primary [X] General 2014 [ ] Other (specify)

Full Name of Payee: Community Outreach Group LLC
Mailing Address: 1110 Vermont Ave N.W. #300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Persuasion phone banks
Category/Type: 004
Date of Public Distribution/Dissemination: 09/01/2014
Amount: 22591.00
Transaction ID: B510999
Date of Disbursement or Obligation: 09/01/2014
Name of Federal Candidate: Kay Hagan
Support: [X] Oppose: [ ]
Office Sought: [ ] President [X] Senate
State: NC
Calendar Year-To-Date Per Election for Office Sought: 927664.73
Disbursement For: [ ] Primary [X] General 2014 [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 28238.75
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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Signature: Liz Gustafson [Electronically Filed] Date: 03/04/2015



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br><b>Planned Parenthood Votes</b>   | <b>FEC IDENTIFICATION NUMBER ▼</b><br><b>C</b> C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> |  |

|   |   |
|---|---|
| Full Name of Payee<br><b>Community Outreach Group LLC</b>   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 01 / 2014  |
| Mailing Address 1110 Vermont Ave N.W. #300  | Amount<br><span style="border: 1px solid black; padding: 2px;">22591.03</span>  |
| City Washington State DC Zip Code 20005   | <b>Transaction ID : B511000</b><br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 01 / 2014  |
| Purpose of Expenditure<br>Persuasion canvasses  | Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>   |
| Name of Federal Candidate<br>Kay Hagan  | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President <input type="checkbox"/> District: _____<br><input type="checkbox"/> State: <b>NC</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">927664.73</span> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____   |

|   |   |
|---|---|
| Full Name of Payee<br><b>Planned Parenthood Health Systems Action Fund</b>  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 01 / 2014  |
| Mailing Address 100 South Boylan Ave.   | Amount<br><span style="border: 1px solid black; padding: 2px;">1325.00</span>   |
| City Raleigh State NC Zip Code 27603  | <b>Transaction ID : B511001</b><br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 01 / 2014  |
| Purpose of Expenditure<br>Volunteer recruitment phone banks   | Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>   |
| Name of Federal Candidate<br>Kay Hagan  | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President <input type="checkbox"/> District: _____<br><input type="checkbox"/> State: <b>NC</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">927664.73</span> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____   |

|  |  |
|--|--|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <span style="border: 1px solid black; padding: 2px;">23916.03</span> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <span style="border: 1px solid black; padding: 2px;"> </span>        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <span style="border: 1px solid black; padding: 2px;"> </span>        |

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*Liz Gustafson*  
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
03 / 04 / 2015

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|   |  |
|---|--|
| NAME OF COMMITTEE (In Full)<br><b>Planned Parenthood Votes</b>  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><b>C</b> C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> |  |

|  |   |
|--|---|
| Full Name of Payee<br><b>Planned Parenthood Health Systems Action Fund</b> | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br>09 / 01 / 2014  |
| Mailing Address 100 South Boylan Ave.                                      | Amount<br>5300.00   |
| City Raleigh State NC Zip Code 27603                                       | <b>Transaction ID : B511002</b>   |
| Purpose of Expenditure<br>Persuasion phone banks                           | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br>09 / 01 / 2014   |
| Name of Federal Candidate<br>Kay Hagan                                     | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought                    | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014<br><input type="checkbox"/> Other (specify) ▶ _____   |
|  | 927664.73   |

|  |   |
|--|---|
| Full Name of Payee<br><b>Planned Parenthood Health Systems Action Fund</b> | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br>09 / 01 / 2014  |
| Mailing Address 100 South Boylan Ave.                                      | Amount<br>5300.00   |
| City Raleigh State NC Zip Code 27603                                       | <b>Transaction ID : B511003</b>   |
| Purpose of Expenditure<br>Persuasion canvasses                             | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br>09 / 01 / 2014   |
| Name of Federal Candidate<br>Kay Hagan                                     | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought                    | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014<br><input type="checkbox"/> Other (specify) ▶ _____   |
|  | 927664.73   |

|  |          |
|--|----------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶   | 10600.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶ |          |
| (c) <b>TOTAL</b> 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.

*Liz Gustafson*  
Signature

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y  
03 / 04 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Planned Parenthood Health Systems Action Fund
Mailing Address 100 South Boylan Ave.
City Raleigh State NC Zip Code 27603
Purpose of Expenditure Persuasion events Category/Type 004
Date of Public Distribution/Dissemination 09/01/2014
Amount 1325.00
Transaction ID : B511005
Date of Disbursement or Obligation 09/01/2014
Name of Federal Candidate Kay Hagan Support
Office Sought: Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 927664.73
Disbursement For: General 2014

Full Name of Payee
Community Outreach Group LLC
Mailing Address 1110 Vermont Ave N.W. #300
City Washington State DC Zip Code 20005
Purpose of Expenditure Persuasion events Category/Type 004
Date of Public Distribution/Dissemination 09/01/2014
Amount 5647.75
Transaction ID : B511006
Date of Disbursement or Obligation 09/01/2014
Name of Federal Candidate Kay Hagan Support
Office Sought: Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 927664.73
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 6972.75
(b) SUBTOTAL of Unitemized Independent Expenditures
(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.
Liz Gustafson [Electronically Filed] Date 03/04/2015
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br><b>Planned Parenthood Votes</b>   | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> |  |

|   |   |
|---|---|
| Full Name of Payee<br><b>Analyst Institute LLC</b>  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>08 / 27 / 2014  |
| Mailing Address<br>815 16th Street, NW  | Amount<br><span style="border: 1px solid black; padding: 2px;">1665.00</span>   |
| City State Zip Code<br>Washington DC 20006  | <b>Transaction ID : B510994</b><br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 04 / 2014  |
| Purpose of Expenditure<br>Payment for independent expenditure originally reported on Sep Monthly Rpt. See Schedule D.         | Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>   |
| Name of Federal Candidate<br>Kay Hagan  | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President <input type="checkbox"/> District: _____<br><input type="checkbox"/> State: <u>NC</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">927664.73</span> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____   |

|   |   |
|---|---|
| Full Name of Payee<br><b>Rising Tide Interactive</b>  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>08 / 27 / 2014  |
| Mailing Address<br>901 New York Ave NW #470 East  | Amount<br><span style="border: 1px solid black; padding: 2px;">4819.25</span>   |
| City State Zip Code<br>Washington DC 20001  | <b>Transaction ID : B510996</b><br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 04 / 2014  |
| Purpose of Expenditure<br>Payment for independent expenditure originally reported on Sep Monthly Rpt. See Schedule D.         | Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>   |
| Name of Federal Candidate<br>Kay Hagan  | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President <input type="checkbox"/> District: _____<br><input type="checkbox"/> State: <u>NC</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">927664.73</span> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____   |

|  |   |
|--|---|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <span style="border: 1px solid black; padding: 2px;">6484.25</span> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <span style="border: 1px solid black; padding: 2px;"> </span>       |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <span style="border: 1px solid black; padding: 2px;"> </span>       |

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.

*Liz Gustafson* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
03 / 04 / 2015

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee: Rising Tide Interactive
Mailing Address: 901 New York Ave NW #470 East
City: Washington State: DC Zip Code: 20001
Date of Public Distribution/Dissemination: 08/27/2014
Amount: 9638.50
Transaction ID: B510997
Date of Disbursement or Obligation: 09/04/2014
Purpose of Expenditure: Payment for independent expenditure originally reported on Sep Monthly Rpt. See Schedule D.
Category/Type: 004
Name of Federal Candidate: Thom Tillis
Office Sought: Senate State: NC
Disbursement For: General 2014

Full Name of Payee: Community Outreach Group LLC
[MEMO ITEM]
Mailing Address: 1110 Vermont Ave N.W. #300
City: Washington State: DC Zip Code: 20005
Date of Public Distribution/Dissemination: 09/08/2014
Amount: 249171.53
Transaction ID: B511928
Date of Disbursement or Obligation: 09/08/2014
Purpose of Expenditure: Paid canvass - persuasion & GOTV. See Schedule D.
Category/Type: 004
Name of Federal Candidate: Thom Tillis
Office Sought: Senate State: NC
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 9638.50
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(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.

Liz Gustafson
[Electronically Filed]
Date 03/04/2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
The Pivot Group
Mailing Address
1701 I Street NW Suite 550
City
Washington State
DC Zip Code
20005
Purpose of Expenditure
Printing of canvass lit. Correction of amount previously reported on 9/10/14
Category/Type
004
Name of Federal Candidate
Kay Hagan
Support
Oppose
Office Sought:
House
Senate
State:
NC
Calendar Year-To-Date
Per Election for Office Sought
927664.73

Date of Public Distribution/Dissemination
09 / 08 / 2014
Amount
13320.42
Transaction ID : B511929
Date of Disbursement or Obligation
09 / 12 / 2014
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
The Pivot Group
Mailing Address
1701 I Street NW Suite 550
City
Washington State
DC Zip Code
20005
Purpose of Expenditure
Printing of canvass lit. Correction of amount previously reported on 9/10/14
Category/Type
004
Name of Federal Candidate
Thom Tillis
Support
Oppose
Office Sought:
House
Senate
State:
NC
Calendar Year-To-Date
Per Election for Office Sought
927664.73

Date of Public Distribution/Dissemination
09 / 08 / 2014
Amount
13320.41
Transaction ID : B511930
Date of Disbursement or Obligation
09 / 12 / 2014
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 26640.83
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Liz Gustafson
[Electronically Filed]
Date
03 / 04 / 2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Community Outreach Group LLC
[MEMO ITEM]
Mailing Address 1110 Vermont Ave N.W. #300
City Washington State DC Zip Code 20005
Purpose of Expenditure Paid canvass - persuasion & GOTV. See Schedule D
Category/Type 004
Name of Federal Candidate Kay Hagan
Support [X] Oppose [ ]
Office Sought: House [ ] Senate [X]
State: NC
Calendar Year-To-Date Per Election for Office Sought 927664.73

Date of Public Distribution/Dissemination 09/08/2014
Amount 249171.53
Transaction ID : B511927
Date of Disbursement or Obligation 09/08/2014
Disbursement For: Primary [ ] General [X] Other (specify) [ ]

Full Name of Payee
Planned Parenthood Action Fund Inc.
Mailing Address 434 West 33rd Street
City New York State NY Zip Code 10001
Purpose of Expenditure Value of in-kind list use (email). See line 11a
Category/Type 004
Name of Federal Candidate Thom Tillis
Support [ ] Oppose [X]
Office Sought: House [ ] Senate [X]
State: NC
Calendar Year-To-Date Per Election for Office Sought 927664.73

Date of Public Distribution/Dissemination 09/11/2014
Amount 167.12
Transaction ID : B528499
Date of Disbursement or Obligation 09/11/2014
Disbursement For: Primary [ ] General [X] Other (specify) [ ]

(a) SUBTOTAL of Itemized Independent Expenditures 167.12
(b) SUBTOTAL of Unitemized Independent Expenditures
(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.

Liz Gustafson
[Electronically Filed]
Date 03/04/2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Planned Parenthood Action Fund Inc.
Mailing Address
434 West 33rd Street
City
New York State
NY Zip Code
10001
Purpose of Expenditure
Value of in-kind list use (email). See line 11a
Category/Type
004
Name of Federal Candidate
Kay Hagan
Support
Office Sought:
Senate State:
NC
Calendar Year-To-Date
Per Election for Office Sought
927664.73

Date of Public Distribution/Dissemination
09 / 11 / 2014
Amount
167.12
Transaction ID : B528500
Date of Disbursement or Obligation
09 / 11 / 2014
Disbursement For:
General
2014

Full Name of Payee
The Feldman Group Inc.
Mailing Address
508-510 8th St. SE
City
Washington State
DC Zip Code
20003
Purpose of Expenditure
Payment for independent expenditure originally reported on
Sep Monthly Rpt. See Schedule D.
Category/Type
004
Name of Federal Candidate
Kay Hagan
Support
Office Sought:
Senate State:
NC
Calendar Year-To-Date
Per Election for Office Sought
927664.73

Date of Public Distribution/Dissemination
08 / 27 / 2014
Amount
10333.33
Transaction ID : B510992
Date of Disbursement or Obligation
09 / 11 / 2014
Disbursement For:
General
2014

(a) SUBTOTAL of Itemized Independent Expenditures 10500.45
(b) SUBTOTAL of Unitemized Independent Expenditures
(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.

Liz Gustafson
[Electronically Filed]
Date
03 / 04 / 2015
Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br><b>Planned Parenthood Votes</b>   | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> |  |

|   |   |
|---|---|
| Full Name of Payee<br><b>The Feldman Group Inc.</b>   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>08 / 27 / 2014  |
| Mailing Address<br>508-510 8th St. SE   | Amount<br><span style="border: 1px solid black; padding: 2px;">20666.67</span>  |
| City State Zip Code<br>Washington DC 20003  | <b>Transaction ID : B510993</b><br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 11 / 2014  |
| Purpose of Expenditure<br>Payment for independent expenditure originally reported on Sep Monthly Rpt. See Schedule D.         | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span>  |
| Name of Federal Candidate<br>Thom Tillis  | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u> |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">927664.73</span> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014<br><input type="checkbox"/> Other (specify) ▶ _____   |

|   |   |
|---|---|
| Full Name of Payee<br><b>Waterfront Strategies</b>  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 12 / 2014  |
| Mailing Address<br>3050 K Street Suite 100  | Amount<br><span style="border: 1px solid black; padding: 2px;">4275.00</span>   |
| City State Zip Code<br>Washington DC 20007  | <b>Transaction ID : B528501</b><br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 10 / 2014  |
| Purpose of Expenditure<br>TV/cable advertising buy  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span>  |
| Name of Federal Candidate<br>Thom Tillis  | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u> |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">927664.73</span> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014<br><input type="checkbox"/> Other (specify) ▶ _____   |

|  |  |
|--|--|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <span style="border: 1px solid black; padding: 2px;">24941.67</span> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <span style="border: 1px solid black; padding: 2px;"> </span>        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <span style="border: 1px solid black; padding: 2px;"> </span>        |

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*Liz Gustafson*

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y  
03 / 04 / 2015

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee: 76 Words
Mailing Address: 1720 Eye Street NW, Ste 550
City: Washington State: DC Zip Code: 20006
Purpose of Expenditure: Production of broadcast advertisement
Category/Type: 004
Date of Public Distribution/Dissemination: 09/12/2014
Amount: 9530.56
Transaction ID: B528497
Date of Disbursement or Obligation: 09/12/2014
Name of Federal Candidate: Thom Tillis
Office Sought: Senate State: NC
Disbursement For: General 2014

Full Name of Payee: Planned Parenthood Action Fund Inc.
[MEMO ITEM]
Mailing Address: 434 West 33rd Street
City: New York State: NY Zip Code: 10001
Purpose of Expenditure: Social media outreach tool. See Schedule D
Category/Type: 004
Date of Public Distribution/Dissemination: 09/16/2014
Amount: 1902.78
Transaction ID: B532997
Date of Disbursement or Obligation: 09/16/2014
Name of Federal Candidate: Thom Tillis
Office Sought: Senate State: NC
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 9530.56
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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Signature: Liz Gustafson [Electronically Filed] Date: 03/04/2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Planned Parenthood Action Fund Inc.
[MEMO ITEM]
Mailing Address 434 West 33rd Street
City New York State NY Zip Code 10001
Purpose of Expenditure List rental. See Schedule D
Category/Type 004
Name of Federal Candidate Thom Tillis
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 927664.73

Date of Public Distribution/Dissemination 09/16/2014
Amount 162.37
Transaction ID : B532998
Date of Disbursement or Obligation 09/16/2014
Office Sought: House Senate State: NC
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee
Planned Parenthood Action Fund Inc.
[MEMO ITEM]
Mailing Address 434 West 33rd Street
City New York State NY Zip Code 10001
Purpose of Expenditure List rental. See Schedule D
Category/Type 004
Name of Federal Candidate Kay Hagan
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 927664.73

Date of Public Distribution/Dissemination 09/16/2014
Amount 163.38
Transaction ID : B532999
Date of Disbursement or Obligation 09/16/2014
Office Sought: House Senate State: NC
Disbursement For: Primary General 2014 Other (specify)

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

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Liz Gustafson
[Electronically Filed]
Date 03/04/2015
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br><b>Planned Parenthood Votes</b>   | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">C</span> C00489799                 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |

|  |  |
|--|--|
| Full Name of Payee<br><b>Analyst Institute LLC</b>   | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">                     MM / DD / YYYY<br/>                     08 / 27 / 2014                 </div>                             |
| Mailing Address   815 16th Street, NW  | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">                     3335.00                 </div>   |
| City                                  State                                  Zip Code<br>Washington                                  DC                                  20006           | <b>Transaction ID : B510995</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">                     MM / DD / YYYY<br/>                     09 / 22 / 2014                 </div> |
| Purpose of Expenditure<br>Payment for independent expenditure originally reported on Sep Monthly Rpt. See Schedule D.  | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>   |
| Name of Federal Candidate<br>Thom Tillis   | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose   Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate   District: _____<br><input type="checkbox"/> President   State: <u>NC</u>      |
| Calendar Year-To-Date Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">                     927664.73                 </div> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014<br><input type="checkbox"/> Other (specify) ▶ _____  |

|  |  |
|--|--|
| Full Name of Payee<br><b>Community Outreach Group LLC</b>  | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">                     MM / DD / YYYY<br/>                     09 / 24 / 2014                 </div>                             |
| Mailing Address   1110 Vermont Ave N.W. #300   | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">                     13964.79                 </div>  |
| City                                  State                                  Zip Code<br>Washington                                  DC                                  20005           | <b>Transaction ID : B533000</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">                     MM / DD / YYYY<br/>                     09 / 30 / 2014                 </div> |
| Purpose of Expenditure<br>Canvassing - Persuasion & GOTV   | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>   |
| Name of Federal Candidate<br>Kay Hagan   | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose   Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate   District: _____<br><input type="checkbox"/> President   State: <u>NC</u>      |
| Calendar Year-To-Date Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">                     927664.73                 </div> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014<br><input type="checkbox"/> Other (specify) ▶ _____  |

|  |   |
|--|---|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <div style="border: 1px solid black; padding: 2px; display: inline-block;">                 17299.79             </div> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;">                 _____             </div>    |
| <b>(c) TOTAL</b> Independent Expenditures..... ▶                   | <div style="border: 1px solid black; padding: 2px; display: inline-block;">                 _____             </div>    |

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.

*Liz Gustafson*  
 \_\_\_\_\_  
 Signature

[Electronically Filed]      Date   

MM / DD / YYYY  
 03 / 04 / 2015

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|  |  |
|--|--|
| NAME OF COMMITTEE (In Full)<br><b>Planned Parenthood Votes</b>   | <b>FEC IDENTIFICATION NUMBER</b> ▼<br><b>C</b> C00489799 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> |  |

|   |                      |   |   |
|---|----------------------|---|---|
| Full Name of Payee<br><b>Community Outreach Group LLC</b>             |                      | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 24 / 2014      |   |
| Mailing Address 1110 Vermont Ave N.W. #300                            |                      | Amount<br><span style="border: 1px solid black; padding: 2px;">13964.79</span>  |   |
| City Washington   | State DC             | Zip Code 20005  | <b>Transaction ID : B533001</b>   |
| Purpose of Expenditure<br>Canvassing - Persuasion & GOTV              | Category/Type<br>004 | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 30 / 2014             |   |
| Name of Federal Candidate<br>Thom Tillis                              |                      | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose  | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought               |                      | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____ |   |
| <span style="border: 1px solid black; padding: 2px;">927664.73</span> |                      |   |   |

|   |                      |   |   |
|---|----------------------|---|---|
| Full Name of Payee<br><b>Planned Parenthood Action Fund Inc.</b>  |                      | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>08 / 14 / 2014      |   |
| Mailing Address 434 West 33rd Street  |                      | Amount<br><span style="border: 1px solid black; padding: 2px;">95.10</span>   |   |
| City New York   | State NY             | Zip Code 10001  | <b>Transaction ID : B510986</b>   |
| Purpose of Expenditure<br>Payment for Independent Expenditure originally reported on<br>Sep Monthly Rpt. See Schedule D | Category/Type<br>004 | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>09 / 30 / 2014             |   |
| Name of Federal Candidate<br>Thom Tillis  |                      | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose  | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought   |                      | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____ |   |
| <span style="border: 1px solid black; padding: 2px;">927664.73</span>   |                      |   |   |

|  |  |
|--|--|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <span style="border: 1px solid black; padding: 2px;">14059.89</span> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <span style="border: 1px solid black; padding: 2px;"> </span>        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <span style="border: 1px solid black; padding: 2px;"> </span>        |

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.

*Liz Gustafson* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
03 / 04 / 2015

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|  |   |
|--|---|
| NAME OF COMMITTEE (In Full)<br><b>Planned Parenthood Votes</b> | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00489799 |
|--|---|

Check if  24-hour report  48-hour report  New report  Amends report filed on  /  /

|  |             |   |   |
|--|-------------|---|---|
| Full Name of Payee<br><b>Planned Parenthood Action Fund Inc.</b>   |             | Date of Public Distribution/Dissemination<br><input type="text"/> / <input type="text"/> / <input type="text"/> |   |
| Mailing Address<br>434 West 33rd Street  |             | Amount<br><input type="text"/>  |   |
| City<br>New York   | State<br>NY | Zip Code<br>10001   | Transaction ID : <b>B510987</b>   |
| Purpose of Expenditure<br>Payment for Independent Expenditure originally reported on Sep Monthly Rpt. See Schedule D |             | Category/Type<br><input type="text"/>   | Date of Disbursement or Obligation<br><input type="text"/> / <input type="text"/> / <input type="text"/>  |
| Name of Federal Candidate<br>Kay Hagan   |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                  | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought  |             | <input type="text"/>  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____         |
|  |             | <input type="text"/>  | <input type="text"/>  |

|  |             |   |   |
|--|-------------|---|---|
| Full Name of Payee<br><b>Planned Parenthood Action Fund Inc.</b>   |             | Date of Public Distribution/Dissemination<br><input type="text"/> / <input type="text"/> / <input type="text"/> |   |
| Mailing Address<br>434 West 33rd Street  |             | Amount<br><input type="text"/>  |   |
| City<br>New York   | State<br>NY | Zip Code<br>10001   | Transaction ID : <b>B510988</b>   |
| Purpose of Expenditure<br>Payment for Independent Expenditure originally reported on Sep Monthly Rpt. See Schedule D |             | Category/Type<br><input type="text"/>   | Date of Disbursement or Obligation<br><input type="text"/> / <input type="text"/> / <input type="text"/>  |
| Name of Federal Candidate<br>Thom Tillis   |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                  | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought  |             | <input type="text"/>  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____         |
|  |             | <input type="text"/>  | <input type="text"/>  |

|  |                      |
|--|----------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶   | <input type="text"/> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶ | <input type="text"/> |
| (c) <b>TOTAL</b> Independent Expenditures.....▶                  | <input type="text"/> |

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.

Liz Gustafson [Electronically Filed] Date  /  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee
Planned Parenthood Action Fund Inc.
Mailing Address
434 West 33rd Street
City
New York State
NY Zip Code
10001
Date of Public Distribution/Dissemination
08 / 23 / 2014
Amount
3740.00
Transaction ID : B510989
Date of Disbursement or Obligation
09 / 30 / 2014
Purpose of Expenditure
Payment for Independent Expenditure originally reported on
Sep Monthly Rpt. See Schedule D
Category/Type
004
Name of Federal Candidate
Kay Hagan
Support
Office Sought:
Senate State: NC
Calendar Year-To-Date
Per Election for Office Sought
927664.73
Disbursement For:
General
Other (specify)

Full Name of Payee
Mailing Address
City
State
Zip Code
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation
Purpose of Expenditure
Category/Type
Name of Federal Candidate
Support
Oppose
Office Sought:
House
Senate
State:
Calendar Year-To-Date
Per Election for Office Sought
Disbursement For:
Primary
General
Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures 3740.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 1326921.74

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.

Signature Liz Gustafson [Electronically Filed] Date 03 / 04 / 2015