

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation NARAL Pro-Choice America		3. FEC Identification Number C C90004185
(b) Address (number and street) ☐ check if different than previously reported 815 16TH STREET NW		
(c) City, State and ZIP Code WASHINGTON DC 20006		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? ☒ Yes ☐ No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
- ☐ 24-Hour Report
☒ 48-Hour Report

b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M M / D D / Y Y Y Y Y Y
03 / 30 / 2012
THROUGH
M M / D D / Y Y Y Y Y Y
04 / 12 / 2012

6. TOTAL CONTRIBUTIONS

0

7. TOTAL INDEPENDENT EXPENDITURES

8797.39

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 any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Kimberly Robinson

Kimberly Robinson

04/12/2012

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

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 5
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
NARAL Pro-Choice America

Full Name (Last, First, Middle Initial) of Payee Chapman Cubine Adams & Hussey		Date MM / DD / YYYY 04 / 12 / 2012	
Mailing Address 1600 Wilson Blvd		Amount 421.88	
City Arlington	State VA	Zip Code 22209	
Purpose of Expenditure Copywriting & Art		Category/ Type	Transaction ID : D1728
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Office Sought: ☐ House State: DC ☐ Senate District: 00 ☒ President Check One: ☒ Support ☐ Oppose	
Calendar Year-To-Date Per Election for Office Sought 279728		Disbursement For: ☐ Primary ☒ General ☐ Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chapman Cubine Adams & Hussey		Date MM / DD / YYYY 04 / 12 / 2012	
Mailing Address 1600 Wilson Blvd		Amount 421.88	
City Arlington	State VA	Zip Code 22209	
Purpose of Expenditure Copywriting & Art		Category/ Type	Transaction ID : D1729
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Office Sought: ☐ House State: DC ☐ Senate District: 00 ☒ President Check One: ☐ Support ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought 279728		Disbursement For: ☐ Primary ☒ General ☐ Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Chapman Cubine Adams & Hussey		Date MM / DD / YYYY 04 / 12 / 2012	
Mailing Address 1600 Wilson Blvd		Amount 46.88	
City Arlington	State VA	Zip Code 22209	
Purpose of Expenditure Copywriting & Art		Category/ Type	Transaction ID : D1730
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Office Sought: ☐ House State: DC ☐ Senate District: 00 ☒ President Check One: ☐ Support ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought 279728		Disbursement For: ☐ Primary ☒ General ☐ Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	890.64
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 5
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
NARAL Pro-Choice America

Full Name (Last, First, Middle Initial) of Payee Chapman Cubine Adams & Hussey		Date MM / DD / YYYY 04 / 12 / 2012	
Mailing Address 1600 Wilson Blvd		Amount 46.88 Transaction ID : D1731	
City Arlington	State VA		
Purpose of Expenditure Copywriting & Art	Category/ Type	Office Sought: ☐ House State: DC ☐ Senate District: 00 ☒ President	
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Check One: ☐ Support ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought 279728		Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Facebook		Date MM / DD / YYYY 04 / 12 / 2012	
Mailing Address 156 University Avenue		Amount 400 Transaction ID : D1732	
City Palo Alto	State CA		
Purpose of Expenditure Online Ads	Category/ Type	Office Sought: ☐ House State: DC ☐ Senate District: 00 ☒ President	
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Check One: ☐ Support ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought 279728		Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Google		Date MM / DD / YYYY 04 / 03 / 2012	
Mailing Address PO Box 39000		Amount 95 Transaction ID : D1733	
City San Francisco	State CA		
Purpose of Expenditure Online ads	Category/ Type	Office Sought: ☐ House State: DC ☐ Senate District: 00 ☒ President	
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Check One: ☐ Support ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought 279728		Disbursement For: ☒ Primary ☐ General 2012 ☐ Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		541.88	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 5
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
NARAL Pro-Choice America

Full Name (Last, First, Middle Initial) of Payee Google		Date MM / DD / YYYY 04 / 03 / 2012	
Mailing Address PO Box 39000		Amount 95	
City San Francisco	State CA	Zip Code 94139-3181	
Purpose of Expenditure Online ads		Category/ Type	Transaction ID : D1734
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Office Sought: ☐ House State: DC ☐ Senate District: 00 ☒ President Check One: ☐ Support ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought 279728		Disbursement For: ☒ Primary ☐ General ☐ Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Google		Date MM / DD / YYYY 04 / 10 / 2012	
Mailing Address PO Box 39000		Amount 95	
City San Francisco	State CA	Zip Code 94139-3181	
Purpose of Expenditure Online ads		Category/ Type	Transaction ID : D1735
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Santorum		Office Sought: ☐ House State: DC ☐ Senate District: 00 ☒ President Check One: ☐ Support ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought 279728		Disbursement For: ☒ Primary ☐ General ☐ Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Google		Date MM / DD / YYYY 04 / 10 / 2012	
Mailing Address PO Box 39000		Amount 95	
City San Francisco	State CA	Zip Code 94139-3181	
Purpose of Expenditure Online ads		Category/ Type	Transaction ID : D1736
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Office Sought: ☐ House State: DC ☐ Senate District: 00 ☒ President Check One: ☐ Support ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought 279728		Disbursement For: ☒ Primary ☐ General ☐ Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	285.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 5 OF 5
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
NARAL Pro-Choice America

Full Name (Last, First, Middle Initial) of Payee NARAL Pro-Choice Foundation		Date MM / DD / YYYY 04 / 12 / 2012	
Mailing Address 1156 15th Street,NW		Amount 3539.94	
City Washington	State DC	Zip Code 20005	
Purpose of Expenditure List rental		Category/ Type	Transaction ID : D1737
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Office Sought: ☐ House State: DC ☐ Senate District: 00 ☒ President Check One: ☒ Support ☐ Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify)	
279728			
Full Name (Last, First, Middle Initial) of Payee NARAL Pro-Choice Foundation		Date MM / DD / YYYY 04 / 12 / 2012	
Mailing Address 1156 15th Street,NW		Amount 3539.93	
City Washington	State DC	Zip Code 20005	
Purpose of Expenditure List rental		Category/ Type	Transaction ID : D1738
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney		Office Sought: ☐ House State: DC ☐ Senate District: 00 ☒ President Check One: ☐ Support ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2012 ☐ Other (specify)	
279728			
Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure		Category/ Type	Office Sought: ☐ House State: _____ ☐ Senate District: _____ ☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: ☐ Support ☐ Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures.....		7079.87	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)		8797.39	