

# 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 checked="" 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 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

Signature of Treasurer  [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									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Planned Parenthood Votes**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="1143446.70"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3134534.89"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2066482.73"/>	<input type="text" value="5372266.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="5201017.62"/>	<input type="text" value="6515712.70"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1527329.93"/>	<input type="text" value="2842025.01"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3673687.69"/>	<input type="text" value="3673687.69"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="66382.35"/>	

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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Planned Parenthood Votes

Report Covering the Period: From: 04 / 01 / 2016 To: 04 / 30 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2063982.73	5369716.00
(ii) Unitemized .....	0.00	50.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2063982.73	5369766.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2066482.73	5372266.00
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.).....	0.00	0.00
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))..... ▶	2066482.73	5372266.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2066482.73	5372266.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B 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 .....	136101.12	246967.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	136101.12	246967.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	33034.37	33034.37
24. Independent Expenditures (use Schedule E) .....	358194.44	1491575.13
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 .....	1000000.00	1000000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	1000000.00	1000000.00
29. Other Disbursements .....	0.00	70448.22
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)) ..	1527329.93	2842025.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1527329.93	2842025.01

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2066482.73	5372266.00
34. Total Contribution Refunds (from Line 28(d)) .....	1000000.00	1000000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1066482.73	4372266.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	136101.12	246967.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	136101.12	246967.29

**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 6 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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. Jennifer Allan Soros**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 70-A Greenwich Ave PMB 199  
 City New York State NY Zip Code 10011-8300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Give Lively Occupation CEO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000000.00**

Date of Receipt **04 / 06 / 2016**  
**Transaction ID : A2016-799099**  
 Amount of Each Receipt this Period **1000000.00**  
 Memo Item

**B. Matthew Bernstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2130 E Lake Rd. NE  
 City Atlanta State GA Zip Code 30307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Emory University Occupation Professor  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **25000.00**

Date of Receipt **04 / 22 / 2016**  
**Transaction ID : A2016-799098**  
 Amount of Each Receipt this Period **25000.00**  
 Memo Item

**C. Dr. Amy Goldman Fowler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 164 Mountain View Road  
 City Rhinebeck State NY Zip Code 12572  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Author  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000000.00**

Date of Receipt **04 / 19 / 2016**  
**Transaction ID : A2016-799101**  
 Amount of Each Receipt this Period **1000000.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2025000.00</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:	PAGE 7 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. Robert Wiley**  
Full Name (Last, First, Middle Initial)

Mailing Address 9142 North Mercer Way #7301

City Mercer Island	State WA	Zip Code 98040
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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 ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2016

**Transaction ID : A2016-799100**

Amount of Each Receipt this Period  
25000.00

Memo Item

**B. Planned Parenthood Action Fund**  
Full Name (Last, First, Middle Initial)

Mailing Address 123 William St, 10th Floor

City New York	State NY	Zip Code 10038
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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 ▼  
76055.02

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2016

**Transaction ID : A2016-652250**

Amount of Each Receipt this Period  
7871.79

Memo Item

In-kind contribution: staff time for strategic federal program work. See Line 21B

**C. Planned Parenthood Action Fund**  
Full Name (Last, First, Middle Initial)

Mailing Address 123 William St, 10th Floor

City New York	State NY	Zip Code 10038
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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 ▼  
76055.02

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2016

**Transaction ID : A2016-652274**

Amount of Each Receipt this Period  
6110.94

Memo Item

In-kind contribution: staff time for accounting and FEC compliance. See Line 21B

<b>SUBTOTAL</b> of Receipts This Page (optional).....	38982.73
<b>TOTAL</b> This Period (last page this line number only).....	2063982.73

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

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

FOR LINE NUMBER: PAGE 8 OF 24  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

**A. Longleaf Pine PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 611 Pennsylvania Ave SE #143  
City Washington State DC Zip Code 20003  
FEC ID number of contributing federal political committee. **C** C00459305  
Name of Employer Occupation  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ Not Applicable  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 29 / 2016  
**Transaction ID : A2016-14817**  
Amount of Each Receipt this Period  
2500.00  
 Memo Item  
Federal PAC

**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  
 Memo Item

**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  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00



**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. Catalyst LLC**

Mailing Address 1090 Vermont Ave./Ste. 300

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Database Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

**Transaction ID : B602040**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. The Pivot Group**

Mailing Address 1720 I Street NW Suite 550

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Research Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

**Transaction ID : B602046**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. 76 Words**

Mailing Address 1806 Vernon St, NW #100

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Video Production

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

**Transaction ID : B602159**

Amount of Each Disbursement this Period

Memo Item

**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. Catalyst LLC**

Mailing Address 1090 Vermont Ave./Ste. 300

City Washington State DC Zip Code 20006

Purpose of Disbursement Database Services

001

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
04 / 19 / 2016

Transaction ID : B602108

Amount of Each Disbursement this Period

5623.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. Civis**

Mailing Address PO Box 4042

City Chicago State IL Zip Code 60654

Purpose of Disbursement Database Services

001

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

Transaction ID : B602105

Amount of Each Disbursement this Period

640.80

Memo Item

Full Name (Last, First, Middle Initial)

**C. Civis**

Mailing Address PO Box 4042

City Chicago State IL Zip Code 60654

Purpose of Disbursement Research Services

001

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
04 / 26 / 2016

Transaction ID : B602107

Amount of Each Disbursement this Period

23830.90

Memo Item

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

30095.20

**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 Inc.**

Mailing Address 123 William St, 10th Floor

City New York State NY Zip Code 10038

Purpose of Disbursement  
Advance payment for election and operating expenses

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Not Applicable

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2016

**Transaction ID : B602122**

Amount of Each Disbursement this Period

75000.00

Memo Item

Full Name (Last, First, Middle Initial)

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

Mailing Address 123 William St, 10th Floor

City New York State NY Zip Code 10038

Purpose of Disbursement  
Payment for staff time for fundraising

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Not Applicable

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2016

**Transaction ID : B599261**

Amount of Each Disbursement this Period

12248.26

Memo Item

payment for staff time for fundraising originally reported on 2016 M4. See Sch. D

Full Name (Last, First, Middle Initial)

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

Mailing Address 123 William St, 10th Floor

City New York State NY Zip Code 10038

Purpose of Disbursement  
In-kind: staff time for accounting and FEC compliance. See Schedule A

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Not Applicable

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2016

**Transaction ID : B602170**

Amount of Each Disbursement this Period

6110.94

Memo Item

In-kind: staff time for accounting and FEC compliance

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

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

93359.20

**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 123 William St, 10th Floor

City New York State NY Zip Code 10038

Purpose of Disbursement  
In-kind contribution: staff time for strategic federal program work. See Schedule A  
Candidate Name

**001**  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Not Applicable

Date of Disbursement

/  /

**Transaction ID : B602171**

Amount of Each Disbursement this Period

Memo Item  
In-kind contribution: staff time for strategic federal program work

Full Name (Last, First, Middle Initial)

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

Mailing Address 123 William St, 10th Floor

City New York State NY Zip Code 10038

Purpose of Disbursement  
Payment for staff time for fundraising  
Candidate Name

**001**  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Not Applicable

Date of Disbursement

/  /

**Transaction ID : B602172**

Amount of Each Disbursement this Period

Memo Item  
See corresponding draw down transaction, ID B602173

Full Name (Last, First, Middle Initial)

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

Mailing Address 123 William St, 10th Floor

City New York State NY Zip Code 10038

Purpose of Disbursement  
Payment for staff time for fundraising  
Candidate Name

**001**  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Not Applicable

Date of Disbursement

/  /

**Transaction ID : B602173**

Amount of Each Disbursement this Period

Memo Item  
Drawdown on advance to Action Fund reported on line 21b of this 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

### A. Priorities USA Action

Mailing Address 601 13th Street NW Suite 610N

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
 Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2016

Transaction ID : B602038

Amount of Each Disbursement this Period

33034.37
----------

Memo Item  
contribution to federal IE PAC

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Memo Item

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

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Memo Item

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

33034.37
----------

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

33034.37
----------

**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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. Jonathan Allan Soros**

Mailing Address 70A Greenwich Ave PMB 199

City New York State NY Zip Code 10011

Purpose of Disbursement  
Contribution Refund

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : B601546**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

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

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 24
	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 <b>MackCrouse Group</b>	Nature of Debt (Purpose): Canvass literature
Mailing Address 2001 N. Beauregard St. Ste 420	
City State Zip Code Alexandria VA 22311	

Outstanding Balance Beginning This Period 3950.00	<b>Transaction ID : D439020</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3950.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>76 Words</b>	Nature of Debt (Purpose): Production of online advertisements. See Schedule E and text on page 16
Mailing Address 1806 Vernon St, NW #100	
City State Zip Code Washington DC 20009	

Outstanding Balance Beginning This Period 30654.12	<b>Transaction ID : D439021</b>	
Amount Incurred This Period 0.00	Payment This Period 14895.00	Outstanding Balance at Close of This Period 15759.12

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Stones' Phones</b>	Nature of Debt (Purpose): Persuasion phone calls. See Schedule E
Mailing Address 41-750 Rancho Las Palmas Dr #E-3	
City State Zip Code Rancho Mirage CA 92270	

Outstanding Balance Beginning This Period 19379.01	<b>Transaction ID : D439022</b>	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 19379.01

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	39088.13
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) ▶	

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

Form/Schedule: SD10  
Transaction ID :

This report is being amended to update Schedule D and corresponding year-to-date totals to reflect the Committee's amended M3 report filed on July 20, 2016.

Form/Schedule: SD10  
Transaction ID:

Regarding the debt to 76 Words (D439021) and three corresponding IEs (B595398, B595399, and B595400): due to a typographical error, the three IEs were originally reported on a 24-hour notice 2/25/16 and on the M3 report as totalling \$14985. When the final invoice of \$14895 was received and paid in April, the error was discovered. The debt and IEs have been corrected in this report.



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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 24
	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 <b>Blueprint Interactive</b>	Nature of Debt (Purpose): Online advertising. See Schedule E
Mailing Address 2229 North Pollard St	
City State Zip Code Arlington VA 22207	

Outstanding Balance Beginning This Period 10500.00	<b>Transaction ID : D439023</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Itzamna Translations Company</b>	Nature of Debt (Purpose): Full Payment of Translation fees See Schedule E .
Mailing Address P.O. Box 1015	
City State Zip Code Glendale AZ 85311	

Outstanding Balance Beginning This Period 124.44	<b>Transaction ID : D439024</b>	
Amount Incurred This Period 0.00	Payment This Period 124.44	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Planned Parenthood Action Fund</b>	Nature of Debt (Purpose): Full Payment for staff time for fundraising See Schedule B
Mailing Address 123 William St, 10th Floor	
City State Zip Code New York NY 10038	

Outstanding Balance Beginning This Period 12248.26	<b>Transaction ID : D439025</b>	
Amount Incurred This Period 0.00	Payment This Period 12248.26	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	10500.00
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 18 OF 24
	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 <b>SKDKnickerbocker LLC</b>	Nature of Debt (Purpose): Production Fees: Television Adversement See schedule E
Mailing Address 1150 18th Street NW/Ste. 800	
City State Zip Code Washington DC 20036	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D439027</b>	
Amount Incurred This Period 16794.22	Payment This Period 0.00	Outstanding Balance at Close of This Period 16794.22

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)..... ▶	16794.22
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	66382.35
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) ▶	66382.35

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

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <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 M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>	

Full Name of Payee <b>Waterfront Strategies</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <b>04 / 19 / 2016</b>
Mailing Address 3050 K Street/Ste. 100	Amount <span style="border: 1px solid black; padding: 2px;">343175.00</span>
City State Zip Code Washington DC 20007	<b>Transaction ID : B599464</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <b>04 / 18 / 2016</b>
Purpose of Expenditure Media Buy: Television Advertisement	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Kelly Ayotte <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">343175.00</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>SKDKnickerbocker LLC</b> <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <b>04 / 19 / 2016</b>
Mailing Address 1150 18th Street NW/Ste. 800	Amount <span style="border: 1px solid black; padding: 2px;">16794.22</span>
City State Zip Code Washington DC 20036	<b>Transaction ID : B599463</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <b>04 / 19 / 2016</b>
Purpose of Expenditure Production Fees: Television Adverement	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Kelly Ayotte <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">359969.22</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">343175.00</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.

*Deirdre Schifeling* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**05 / 20 / 2016**

Signature \_\_\_\_\_

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

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <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 <b>Itzamna Translations Company</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 17 / 2016
Mailing Address P.O. Box 1015	Amount <span style="border: 1px solid black; padding: 2px;">2.59</span>
City State Zip Code Glendale AZ 85311	<b>Transaction ID : B598485</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 26 / 2016
Purpose of Expenditure Payment for IE (B598485) originally reported on 2016 FEC M3 Report. See Schedule D	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Hillary Clinton	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1189488.69</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Itzamna Translations Company</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 17 / 2016
Mailing Address P.O. Box 1015	Amount <span style="border: 1px solid black; padding: 2px;">2.59</span>
City State Zip Code Glendale AZ 85311	<b>Transaction ID : B598486</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 26 / 2016
Purpose of Expenditure Payment for IE (B598486) originally reported on 2016 FEC M3 Report. See Schedule D	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Hillary Clinton	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: TX
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1189488.69</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">5.18</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.

*Deirdre Schifeling* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
05 / 20 / 2016

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: Itzamna Translations Company
Mailing Address: P.O. Box 1015
City: Glendale, State: AZ, Zip Code: 85311
Purpose of Expenditure: Payment for IE (B598487) originally reported on 2016 FEC M3 Report. See Schedule D
Category/Type: 004
Date of Public Distribution/Dissemination: 02/17/2016
Amount: 2.59
Transaction ID: B598487
Date of Disbursement or Obligation: 04/26/2016
Name of Federal Candidate: Hillary Clinton
Support: [X]
Office Sought: [X] President
Disbursement For: [X] Primary

Full Name of Payee: Itzamna Translations Company
Mailing Address: P.O. Box 1015
City: Glendale, State: AZ, Zip Code: 85311
Purpose of Expenditure: Payment for IE (B598488) originally reported on 2016 FEC M3 Report. See Schedule D
Category/Type: 004
Date of Public Distribution/Dissemination: 02/17/2016
Amount: 2.59
Transaction ID: B598488
Date of Disbursement or Obligation: 04/26/2016
Name of Federal Candidate: Hillary Clinton
Support: [X]
Office Sought: [X] President
Disbursement For: [X] Primary

(a) SUBTOTAL of Itemized Independent Expenditures ..... 5.18
(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: Deirdre Schifeling [Electronically Filed] Date: 05/20/2016

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
Memo Item
Itzamna Translations Company
Mailing Address
P.O. Box 1015
City
Glendale State
AZ Zip Code
85311
Purpose of Expenditure
Payment for IE (B598489) originally reported on 2016 FEC M3 Report. See Schedule D
Category/Type
004
Name of Federal Candidate
Nationwide Unitemized
Support
Oppose
Office Sought:
House
Senate
State:
US
Calendar Year-To-Date
Per Election for Office Sought
8168.61

Date of Public Distribution/Dissemination
02 / 17 / 2016
Amount
111.49
Transaction ID : B598489
Date of Disbursement or Obligation
04 / 26 / 2016
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Memo Item
Itzamna Translations Company
Mailing Address
P.O. Box 1015
City
Glendale State
AZ Zip Code
85311
Purpose of Expenditure
Payment for IE (B598490) originally reported on 2016 FEC M3 Report. See Schedule D
Category/Type
004
Name of Federal Candidate
Hillary Clinton
Support
Oppose
Office Sought:
House
Senate
State:
SC
Calendar Year-To-Date
Per Election for Office Sought
1189488.69

Date of Public Distribution/Dissemination
02 / 17 / 2016
Amount
2.59
Transaction ID : B598730
Date of Disbursement or Obligation
04 / 26 / 2016
Disbursement For:
Primary
General
Other (specify)

Table with 2 columns: Description and Amount. Row (a) SUBTOTAL of Itemized Independent Expenditures: 114.08. 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
Deirdre Schifeling

[Electronically Filed]

Date
05 / 20 / 2016

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: Pymt. for IE (B595398) rptd. on 2016 FEC M3 rpt.; note corrected amt.; see SchD and text on page 16
Category/Type: 004
Name of Federal Candidate: Hillary Clinton
Office Sought: President
Disbursement For: Primary
Amount: 8073.85
Transaction ID: B595398
Date of Disbursement or Obligation: 04/28/2016

Full Name of Payee: 76 Words
Mailing Address: 1806 Vernon St, NW #100
City: Washington State: DC Zip Code: 20009
Purpose of Expenditure: Pymt. for IE (B595399) rptd. on 2016 FEC M3 rpt.; note corrected amt.; see SchD and text on page 16
Category/Type: 004
Name of Federal Candidate: Hillary Clinton
Office Sought: President
Disbursement For: Primary
Amount: 3279.80
Transaction ID: B595399
Date of Disbursement or Obligation: 04/28/2016

(a) SUBTOTAL of Itemized Independent Expenditures: 11353.65
(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: Deirdre Schifeling
Date: 05/20/2016
[Electronically Filed]

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

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

Full Name of Payee <b>76 Words</b>	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>02 / 24 / 2016</b>
Mailing Address 1806 Vernon St, NW #100		Amount <span style="border: 1px solid black; padding: 2px;">3541.35</span>
City Washington	State DC	Zip Code 20009
Purpose of Expenditure Pymt. for IE (B595400) rptd. on 2016 FEC M3 rpt.; note corrected amt.; see SchD and text on page 16	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>04 / 28 / 2016</b>
Name of Federal Candidate Hillary Clinton	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>
Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">1189488.69</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Mailing Address		Amount <span style="border: 1px solid black; padding: 2px;"></span>
City	State	Zip Code
Purpose of Expenditure	Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;"></span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">3541.35</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"></span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">358194.44</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.

*Deirdre Schifeling* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
**05 / 20 / 2016**

Signature