

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Planned Parenthood Action Fund Inc. PAC

ADDRESS (number and street) 1780 Massachusetts Ave. NW  
 Check if different than previously reported. (ACC)  
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00314617  
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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 09 01 2004 through 09 30 2004

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 Norman Greene

Signature of Treasurer Electronically Filed by Norman Greene Date 04 12 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	4

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>4</td></tr></table>	Y	Y	Y	Y	2	0	0	4		4711.70
Y	Y	Y	Y							
2	0	0	4							
(b) Cash on Hand at Beginning of Reporting Period .....	13029.97									
(c) Total Receipts (from Line 19) .....	311882.47	821836.86								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	324912.44	826548.56								
7. Total Disbursements (from Line 31) .....	119644.46	621280.58								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	205267.98	205267.98								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

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

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	25500.00	107350.00
(i) Itemized (use Schedule A) .....	58992.05	476797.32
(ii) Unitemized .....	84492.05	584147.32
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	84492.05	584147.32
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) .....	2813.30	12501.59
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	224577.12	225187.95
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	311882.47	821836.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	311882.47	821836.86

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	2644.46	15384.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	2644.46	15384.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	117000.00	397596.82
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	500.00
29. Other Disbursements.....	0.00	207799.37
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	119644.46	621280.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	119644.46	621280.58

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	84492.05	584147.32
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	84492.05	583647.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2644.46	15384.39
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	2813.30	12501.59
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-168.84	2882.80

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Frederick B Andrews

Mailing Address P. O. Box 2092

City State Zip Code  
Nashville IN 47448

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2004

**Transaction ID:** A2004-1050429

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Judith Avery

Mailing Address 2222 Hyde Street #7

City State Zip Code  
San Francisco CA 94109

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

Name of Employer Occupation  
Self Private Investor

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 01 / 2004

**Transaction ID:** A2004-1050325

Amount of Each Receipt this Period  
4000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Suzanne Bell

Mailing Address 707 Hankin St

City State Zip Code  
Silver Spring MD 20910

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 10 / 2004

**Transaction ID:** A2004-1042471

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Ms. Elizabeth Benedict

Mailing Address 80 Seacape Drive

City State Zip Code  
Muir Beach CA 94965

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

Name of Employer Self-Employed Occupation  
Actor/Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2004

**Transaction ID:** A2004-1050149

Amount of Each Receipt this Period  
225.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Anne Searle Bent

Mailing Address 361 Moffett Road

City State Zip Code  
Lake Bluff IL 60044

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2004

**Transaction ID:** A2004-1042559

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Betty Birdsey

Mailing Address 72 Woodward Road

City State Zip Code  
Newfield NY 14867

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2004

**Transaction ID:** A2004-1043035

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1925.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Sue E Braunlin</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2004	
Mailing Address 10620 Winterwood		<b>Transaction ID: A2004-1050162</b>	
City State Zip Code Carmel IN 46032	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Anesthesiologist Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Lu Ann C Brenno</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2004	
Mailing Address 7676 Turner Road		<b>Transaction ID: A2004-1050540</b>	
City State Zip Code Maple Plain MN 55359	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired R.N. Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Robert P Burchard</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2004	
Mailing Address 913 Rambling Drive		<b>Transaction ID: A2004-1042675</b>	
City State Zip Code Baltimore MD 21228	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Dr. &amp; Mrs. James Butler</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2004	
Mailing Address 10023 Pine Forest		<b>Transaction ID: A2004-1050365</b>	
City State Zip Code Houston TX 77042	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Peggy Clemmer</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2004	
Mailing Address 751 E Parkcenter Blvd		<b>Transaction ID: A2004-1042261</b>	
City State Zip Code Boise ID 83706	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer None	Occupation Widow		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Gary Cohn</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2004	
Mailing Address 2 Ascot Court		<b>Transaction ID: A2004-1042300</b>	
City State Zip Code Oakland CA 94611	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. & Mrs. W. Thomas Cook

Mailing Address 7869 Estrella Court

City State Zip Code  
Sarasota FL 34238

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

Name of Employer Occupation  
Computer Science Corp. Programmer Analyst/Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 10 / 2004

Transaction ID: A2004-1050334

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Shirley W Cooper

Mailing Address 2423 Bonnywood Lane

City State Zip Code  
Dallas TX 75233

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 21 / 2004

Transaction ID: A2004-1042662

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Wendy P Cooper

Mailing Address 219 Glen Oak Court

City State Zip Code  
Delafield WI 53018

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2004

Transaction ID: A2004-1042808

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 45
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Annette P Cumming		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2004	
Mailing Address 165 Huckleberry Drive		<b>Transaction ID:</b> A2004-1043057	
City State Zip Code Jackson WY 83001	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	To be refunded		
Name of Employer Cumming Foundation	Occupation Vice President	Aggregate Year-to-Date ▼ 10000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Lori Dodwell		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2004	
Mailing Address 2109 S. Illini Road		<b>Transaction ID:</b> A2004-1042687	
City State Zip Code Springfield IL 62704	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation Information Requested	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Lesa R Downes		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2004	
Mailing Address 1160 Vallecito Court		<b>Transaction ID:</b> A2004-1050247	
City State Zip Code Lafayette CA 94549	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Homemaker	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary Ann Downey

Mailing Address 860 Berkshire Road N.E.

City Atlanta State GA Zip Code 30324

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
09 / 11 / 2004

Transaction ID: A2004-1042479

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Margaret Durkin

Mailing Address 8555 Royal Lythan Ln

City Holland State OH Zip Code 43528

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
09 / 30 / 2004

Transaction ID: A2004-1043004

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Barbara Fanta

Mailing Address 425 Home Avenue #2A

City Oak Park State IL Zip Code 60302

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
09 / 01 / 2004

Transaction ID: A2004-1050366

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	950.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. MR. PAUL J FEDER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2004	
Mailing Address 19 Irving Avenue		<b>Transaction ID: A2004-1050364</b>	
City State Zip Code Atherton CA 94027	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. David Fischell</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2004	
Mailing Address 71 Riverlawn Drive		<b>Transaction ID: A2004-1042487</b>	
City State Zip Code Fair Haven NJ 07704	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. L. Gaillard</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2004	
Mailing Address General Delivery		<b>Transaction ID: A2004-1043016</b>	
City State Zip Code Fishers Isle NY 06390	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Ms. Eva R Glazer

Mailing Address 135 Canon Drive

City State Zip Code  
Orinda CA 94563

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
09 / 21 / 2004

Transaction ID: A2004-1050432

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Sheldon Gleisser

Mailing Address 1866 Northwest Boulevard # F

City State Zip Code  
Columbus OH 43212

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
09 / 24 / 2004

Transaction ID: A2004-1042742

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Michael & Barbara Gordon

Mailing Address 10128 NE 59th St

City State Zip Code  
Kirkland WA 98033

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

Name of Employer Retired Occupation Retired (Michael)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
09 / 11 / 2004

Transaction ID: A2004-1050535

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Felice A Heller, M.D.

Mailing Address 89 Fox Chase Lane

City State Zip Code  
W Hartford CT 06117

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2004

Transaction ID: A2004-1042993

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sharon L Hillier

Mailing Address 945 Field Club Rd

City State Zip Code  
Pittsburgh PA 15238

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 29 / 2004

Transaction ID: A2004-1042862

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Sharlene A Hodges

Mailing Address 5504 Sunnyside Place

City State Zip Code  
Freeland WA 98249

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

Name of Employer Retired Occupation Retired Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 21 / 2004

Transaction ID: A2004-1050546

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Jane and Norman Holland</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2004	
Mailing Address 1607 N.W. 19th Circle		<b>Transaction ID: A2004-1050534</b>	
City State Zip Code Gainesville FL 32605		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired (Jane)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Janet C Howard</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2004	
Mailing Address 5624 Boatwright Circle		<b>Transaction ID: A2004-1050435</b>	
City State Zip Code Williamsburg VA 23185		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Olga Howard</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2004	
Mailing Address 3536 Drake Drive		<b>Transaction ID: A2004-1050539</b>	
City State Zip Code Santa Maria CA 93455		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Anna Jensen		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2004	
Mailing Address 44 Running Brook Lane		<b>Transaction ID:</b> A2004-1050254	
City State Zip Code New Canaan CT 06840		Amount of Each Receipt this Period 225.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Rosalind Kalb		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2004	
Mailing Address 42 Marion Road		<b>Transaction ID:</b> A2004-1042625	
City State Zip Code Westport CT 06880		Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested Occupation Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Jane Kirkpatrick		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2004	
Mailing Address 1790 Old Military Rd		<b>Transaction ID:</b> A2004-1042725	
City State Zip Code Central Point OR 97502		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested Occupation Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gregory Lincoln

Mailing Address 100 Polipoli Road

City State Zip Code  
Kula HI 96790

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

Name of Employer Self Occupation  
Artist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 23 / 2004

Transaction ID: A2004-1050173

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sandra E Lincoln

Mailing Address 12111 - 219th Avenue

City State Zip Code  
Bristol WI 53104

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

Name of Employer Information Requested Occupation  
Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 22 / 2004

Transaction ID: A2004-1042677

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jay K Lucker

Mailing Address 53 Buckman Drive

City State Zip Code  
Lexington MA 02421

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

Name of Employer Retired Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 24 / 2004

Transaction ID: A2004-1050463

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **450.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 45		
	<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

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

Full Name (Last, First, Middle Initial) <b>A. MS. JANE MAPEL</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 4	
Mailing Address 1208 Kathryn Street		<b>Transaction ID: A2004-1042972</b>	
City State Zip Code Hurst TX 76053	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Information Requested Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Katherine A. Mechling</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 4	
Mailing Address P. O. Box 489		<b>Transaction ID: A2004-1042289</b>	
City State Zip Code Selma OR 97538	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Information Requested Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Shelley Miller</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 4	
Mailing Address 43 East Washington Avenue		<b>Transaction ID: A2004-1050183</b>	
City State Zip Code Clarkston MI 48346	Amount of Each Receipt this Period 225.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Vandeveer Garzia Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Attorney Aggregate Year-to-Date ▼ 375.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	675.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Christian Minkler

Mailing Address 30 Rose Court # 3

City State Zip Code  
East Aurora NY 14226

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

Name of Employer Occupation  
Erie County Service Coordinator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 14 / 2004

**Transaction ID:** A2004-1050565

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Clark Molstad

Mailing Address 1635 Summit Crest Court

City State Zip Code  
San Bernardino CA 92405

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 24 / 2004

**Transaction ID:** A2004-1042731

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Ruth Moore

Mailing Address 4303 4th Avenue NE

City State Zip Code  
Seattle WA 98105

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2004

**Transaction ID:** A2004-1050522

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
MS. SUSAN E PANGIERA

Mailing Address 3420 Washington Drive

City Falls Church State VA Zip Code 22041

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
09 / 29 / 2004

Transaction ID: A2004-1042851

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard G Peterson

Mailing Address 1158 5th Avenue #9A

City New York State NY Zip Code 10029

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
09 / 27 / 2004

Transaction ID: A2004-1050473

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
John T Pigott

Mailing Address Post Office Box 402075

City Hesperia State CA Zip Code 92340

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
09 / 29 / 2004

Transaction ID: A2004-1050486

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Ms. Elizabeth S Reese

Mailing Address 830 Park Avenue # 10C

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Unemployed Salesperson

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2004

Transaction ID: A2004-1050557

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Joanna Rogers

Mailing Address 2023 Valleyhigh Drive NW

City State Zip Code  
Rochester MN 55901

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2004

Transaction ID: A2004-1042460

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Joanna Rogers

Mailing Address 2023 Valleyhigh Drive NW

City State Zip Code  
Rochester MN 55901

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2004

Transaction ID: A2004-1042926

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. David Spencer		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2004	
Mailing Address 44 Hull St.		<b>Transaction ID:</b> A2004-1050226	
City Newtonville	State MA	Amount of Each Receipt this Period 250.00	
Zip Code 02460			
FEC ID number of contributing federal political committee. C			
Name of Employer M.I.T.	Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Nevin Spiller		Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2004	
Mailing Address 2815 Earle Drive		<b>Transaction ID:</b> A2004-1050150	
City Grand Prairie	State TX	Amount of Each Receipt this Period 250.00	
Zip Code 75052			
FEC ID number of contributing federal political committee. C			
Name of Employer Bonanza Oil Co.	Occupation Admin Asst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Nevin Spiller		Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2004	
Mailing Address 2815 Earle Drive		<b>Transaction ID:</b> A2004-1050151	
City Grand Prairie	State TX	Amount of Each Receipt this Period 250.00	
Zip Code 75052			
FEC ID number of contributing federal political committee. C			
Name of Employer Bonanza Oil Co.	Occupation Admin Asst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Mrs. Susan Steif</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2004	
Mailing Address 1012 Oakleaf Circle		<b>Transaction ID: A2004-1042602</b>	
City Blythewood	State SC	Zip Code 29016	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. MS. MARY E SULLIVAN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2004	
Mailing Address 2535 Washington Street		<b>Transaction ID: A2004-1050333</b>	
City Lincoln	State NE	Zip Code 68502	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer LRC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Program Director Social Worker Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. MR. JOSEPH J SWEENEY</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2004	
Mailing Address 18929 Monte Vista Drive		<b>Transaction ID: A2004-1042288</b>	
City Saratoga	State CA	Zip Code 95070	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Polly M Timken		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 4
Mailing Address 15 River Edge Road		<b>Transaction ID:</b> A2004-1042720
City State Zip Code Old Saybrook CT 06475	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Dee Vanvleck		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 0 4
Mailing Address 930 Evergreen Drive		<b>Transaction ID:</b> A2004-1042473
City State Zip Code Lincoln NE 68510	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Charlene Weber		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 4
Mailing Address 10 Serenity Lane		<b>Transaction ID:</b> A2004-1050447
City State Zip Code Alamo CA 94507	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Gary Wilson		Date of Receipt M M / D D / Y Y Y Y Y 09 / 21 / 2004	
Mailing Address 1505 Spero Court		<b>Transaction ID:</b> A2004-1042267	
City State Zip Code Wheaton IL 60187	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Writer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Brian Zapf		Date of Receipt M M / D D / Y Y Y Y Y 09 / 24 / 2004	
Mailing Address Post Office Box 448		<b>Transaction ID:</b> A2004-1042754	
City State Zip Code Ovid NY 14521	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	2550.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 27 / 45	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

Mailing Address 434 West 33rd Street

City State Zip Code  
New York NY 10001

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5718.25

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	4

Transaction ID: A5695

Amount of Each Receipt this Period  
2813.30

Reimbursement of Administrative Expenses

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2813.30
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2813.30

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

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

FOR LINE NUMBER: PAGE 28 / 45  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Planned Parenthood Federation of America Inc.  
 Mailing Address 434 West 33rd Street  
 City State Zip Code  
 New York NY 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 13 / 2004  
**Transaction ID: A5700**  
 Amount of Each Receipt this Period  
 200000.00  
 Return of temporary transfer made on 8/13/04

**B.** Full Name (Last, First, Middle Initial)  
Planned Parenthood Action Fund Inc.  
 Mailing Address 434 West 33rd Street  
 City State Zip Code  
 New York NY 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 24309.87

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2004  
**Transaction ID: A5699**  
 Amount of Each Receipt this Period  
 24309.87  
 Inadvertent transfer due to clerical error

**C.** Full Name (Last, First, Middle Initial)  
Bank of New York  
 Mailing Address 1290 Avenue of the Americas  
 City State Zip Code  
 New York NY 10104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 878.08

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2004  
**Transaction ID: A3991**  
 Amount of Each Receipt this Period  
 267.25

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>224577.12</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>224577.12</b>

**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)

PAGE 29 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Bank of New York</b>		<b>Transaction ID:</b> B154403 Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2004
Mailing Address 1290 Avenue of the Americas		Amount of Each Disbursement this Period 1298.25
City New York State NY Zip Code 10104	Purpose of Disbursement Bank Fees Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) <b>B. Holly Near</b>		<b>Transaction ID:</b> B81464 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2004
Mailing Address P.O. Box 236		Amount of Each Disbursement this Period 1000.00
City Ukiah State CA Zip Code 95482	Purpose of Disbursement Generic Get Out the Vote Candidate Name Category/Type: 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		<b>Transaction ID:</b> B154391 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2004
Mailing Address P.O. Box 53852		Amount of Each Disbursement this Period 247.64
City Phoenix State AZ Zip Code 85072	Purpose of Disbursement Discount Fee Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2545.89
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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

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

Transaction ID: B611

Date of Disbursement

Mailing Address 1780 Massachusetts Avenue NW

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	0	4

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

20.57
-------

Purpose of Disbursement  
Gloria Feldt Convention Speech for DNC

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2004  
 Primary  General  
 Other (specify) ▼

Payment for in-kind contribution disclosed on August Monthly Report

State: DC District:

Not Applicable

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

20.57
-------

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

2566.46
---------

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Bishop for Congress 2004</b>		Transaction ID: B81093 Date of Disbursement 09 / 07 / 2004	
Mailing Address P.O. Box 437		Amount of Each Disbursement this Period 2000.00	
City Farmingville State NY Zip Code 11738	Purpose of Disbursement P-2004 U.S. House 01 NY Candidate Name Tim Bishop Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Louise Slaughter Re-Election Cmte</b>		Transaction ID: B81416 Date of Disbursement 09 / 07 / 2004	
Mailing Address P.O. Box 366		Amount of Each Disbursement this Period 2500.00	
City Fairport State NY Zip Code 14450	Purpose of Disbursement P-2004 U.S. House 28 NY Candidate Name Louise M Slaughter Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 28	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Al Green for Congress</b>		Transaction ID: B81414 Date of Disbursement 09 / 16 / 2004	
Mailing Address 3003 South Loop West #321		Amount of Each Disbursement this Period 3000.00	
City Houston State TX Zip Code 77054	Purpose of Disbursement G-2004 U.S. House 09 TX Candidate Name Al Green Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 09	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Castor for Senate</b>		<b>Transaction ID: B81423</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2004
Mailing Address P.O. Box 18045		Amount of Each Disbursement this Period 5000.00
City Tampa State FL Zip Code 33679	011 Category/ Type	
Purpose of Disbursement O-2004 U.S. Senate FL		
Candidate Name Betty Castor		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Debt Ret Primary	

Full Name (Last, First, Middle Initial) <b>B. Bob Menendez for Congress</b>		<b>Transaction ID: B81424</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2004
Mailing Address 253 Academy Street Floor 1		Amount of Each Disbursement this Period 1000.00
City Jersey City State NJ Zip Code 07306	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 13 NJ		
Candidate Name Robert Menendez		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Daly for Congress</b>		<b>Transaction ID: B81425</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2004
Mailing Address PO Box 241088		Amount of Each Disbursement this Period 1000.00
City Apple Valley State MN Zip Code 55124	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 02 MN		
Candidate Name Teresa Ann Daly		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Darlene Hooley for Congress</b>		<b>Transaction ID: B81426</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 4
Mailing Address P.O. Box 2050		Amount of Each Disbursement this Period 3000.00
City Salem State OR Zip Code 97308	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 05 OR		
Candidate Name Darlene Hooley		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Debbie Wasserman-Schultz for Congress</b>		<b>Transaction ID: B81427</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 4
Mailing Address 1725 Main Street #215		Amount of Each Disbursement this Period 2000.00
City Weston State FL Zip Code 33326	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 20 FL		
Candidate Name Debbie Wasserman-Schultz		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 20	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Cleaver for Congress</b>		<b>Transaction ID: B81428</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 4
Mailing Address P.O. Box 411872		Amount of Each Disbursement this Period 2000.00
City Kansas City State MO Zip Code 64141	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 05 MO		
Candidate Name Emanuel Cleaver		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 05	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Chris Dodd 2004</b>		<b>Transaction ID: B81429</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2004
Mailing Address 1800 Silas Dean Hwy Ste. 220		Amount of Each Disbursement this Period 2000.00
City Rocky Hill State CT Zip Code 06067	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. Senate CT		
Candidate Name Christopher J Dodd		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends of Barbara Boxer</b>		<b>Transaction ID: B81430</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2004
Mailing Address 5757 Wilshire Blve. #395		Amount of Each Disbursement this Period 1000.00
City Los Angeles State CA Zip Code 90036	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. Senate CA		
Candidate Name Barbara Boxer		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends of Weiner</b>		<b>Transaction ID: B81431</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2004
Mailing Address P.O. Box 1132		Amount of Each Disbursement this Period 1000.00
City New York City State NY Zip Code 10159	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 09 NY		
Candidate Name Anthony D Weiner		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 09	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Ginny Schrader for Congress</b>		<b>Transaction ID: B81432</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2004
Mailing Address P.O. Box 876		Amount of Each Disbursement this Period 2000.00
City Morrisville	State PA	
Zip Code 19067		
Purpose of Disbursement G-2004 U.S. House 08 PA		
Candidate Name Virginia W Schrader		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 08		

Full Name (Last, First, Middle Initial) <b>B. Herseth for Congress</b>		<b>Transaction ID: B81433</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2004
Mailing Address P.O. Box 2009		Amount of Each Disbursement this Period 5000.00
City Sioux Falls	State SD	
Zip Code 57101		
Purpose of Disbursement G-2004 U.S. House AL SD		
Candidate Name Stephanie Herseth		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SD District:		

Full Name (Last, First, Middle Initial) <b>C. Julia Carson for Congress</b>		<b>Transaction ID: B81434</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2004
Mailing Address 1 N. Capitol St. #211		Amount of Each Disbursement this Period 2000.00
City Indianapolis	State IN	
Zip Code 46204		
Purpose of Disbursement G-2004 U.S. House 07 IN		
Candidate Name Julia M Carson		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Melissa Bean for Congress</b>		<b>Transaction ID: B81435</b> Date of Disbursement 09 / 16 / 2004	
Mailing Address PO Box 3068		Amount of Each Disbursement this Period 1000.00	
City Barrington	State IL	Zip Code 60011	
Purpose of Disbursement G-2004 U.S. House 08 IL		011 Category/ Type	
Candidate Name Melissa Bean			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IL District: 08			

Full Name (Last, First, Middle Initial) <b>B. Mikulski for Senate</b>		<b>Transaction ID: B81436</b> Date of Disbursement 09 / 16 / 2004	
Mailing Address P.O. Box 13147		Amount of Each Disbursement this Period 4000.00	
City Baltimore	State MD	Zip Code 21203	
Purpose of Disbursement G-2004 U.S. Senate MD		011 Category/ Type	
Candidate Name Barbara A Mikulski			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MD District:			

Full Name (Last, First, Middle Initial) <b>C. Nadler for Congress</b>		<b>Transaction ID: B81437</b> Date of Disbursement 09 / 16 / 2004	
Mailing Address P.O. Box 40 Village Station		Amount of Each Disbursement this Period 1000.00	
City New York	State NY	Zip Code 10014	
Purpose of Disbursement G-2004 U.S. House 08 NY		011 Category/ Type	
Candidate Name Jerrold Nadler			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 08			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Patty Wetterling for Congress</b>		<b>Transaction ID: B81438</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 4
Mailing Address PO Box 1334		Amount of Each Disbursement this Period 1000.00
City St. Cloud State MN Zip Code 56302	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 06 MN		
Candidate Name Patty Wetterling		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Schiff for Congress</b>		<b>Transaction ID: B81439</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 4
Mailing Address 35 S. Raymond Avenue		Amount of Each Disbursement this Period 1000.00
City Pasadena State CA Zip Code 91105	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 29 CA		
Candidate Name Adam Schiff		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 29	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Woolsey for Congress</b>		<b>Transaction ID: B81415</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 4
Mailing Address P.O. Box 750176		Amount of Each Disbursement this Period 1000.00
City Petaluma State CA Zip Code 94975	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 06 CA		
Candidate Name Lynn Woolsey		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 06	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<b>A. Levin for Congress</b> Full Name (Last, First, Middle Initial) Mailing Address 28411 Gratiot Ave. City Roseville State MI Zip Code 48066 Purpose of Disbursement G-2004 U.S. House 12 MI Candidate Name Sander M Levin Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 12 Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B81440</b> Date of Disbursement 09 / 23 / 2004 Amount of Each Disbursement this Period 2500.00 011 Category/ Type
--	--	---

<b>B. Lofgren for Congress</b> Full Name (Last, First, Middle Initial) Mailing Address 50 W. San Fernando Ste. 350 City San Jose State CA Zip Code 95113 Purpose of Disbursement G-2004 U.S. House 16 CA Candidate Name Zoe Lofgren Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 16 Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B81441</b> Date of Disbursement 09 / 23 / 2004 Amount of Each Disbursement this Period 1000.00 011 Category/ Type
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<b>C. Tierney for Congress</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 8013 City Salem State MA Zip Code 01970 Purpose of Disbursement G-2004 U.S. House 06 MA Candidate Name John F Tierney Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 06 Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B81442</b> Date of Disbursement 09 / 23 / 2004 Amount of Each Disbursement this Period 500.00 011 Category/ Type
---	--	--

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Waxman for Congress</b>		<b>Transaction ID: B81443</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2004
Mailing Address 6380 Wilshire Blvd. #1612		Amount of Each Disbursement this Period 500.00
City Los Angeles State CA Zip Code 90048	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 30 CA		
Candidate Name Henry A Waxman		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 30	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Barbieri for Congress</b>		<b>Transaction ID: B81444</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2004
Mailing Address 707 W. Main Ave. PMB #70		Amount of Each Disbursement this Period 5000.00
City Spokane State WA Zip Code 99201	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 05 WA		
Candidate Name Donald K Barbieri		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 05	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Bishop for Congress 2004</b>		<b>Transaction ID: B81445</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2004
Mailing Address P.O. Box 437		Amount of Each Disbursement this Period 5000.00
City Farmingville State NY Zip Code 11738	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 01 NY		
Candidate Name Tim Bishop		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Conti for Congress Inc.</b>		<b>Transaction ID: B81446</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address 25958 Genesee Trail Rd K223		Amount of Each Disbursement this Period 500.00
City Golden State CO Zip Code 80401	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 06 CO		
Candidate Name Joanna L Conti		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 06	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Thomas for Congress</b>		<b>Transaction ID: B81447</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address 7625 W. 5th Avenue #200-D		Amount of Each Disbursement this Period 2500.00
City Golden State CO Zip Code 80026	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 07 CO		
Candidate Name David Thomas		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Denise Majette for Senate</b>		<b>Transaction ID: B81448</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address 360 East Ponce de Leon Ave.		Amount of Each Disbursement this Period 2000.00
City Decatur State GA Zip Code 30030	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. Senate GA		
Candidate Name Denise Majette		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Democratic Executive Committee of Florida</b>		<b>Transaction ID: B81449</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address PO Box 1758		Amount of Each Disbursement this Period 5000.00
City Tallahassee	State FL	
Zip Code 32302	Purpose of Disbursement O-2004 Fed Multi-cand. Party Cmte FL	
Candidate Name	Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: FL District:	Not Applicable	

Full Name (Last, First, Middle Initial) <b>B. Frank for Congress</b>		<b>Transaction ID: B81450</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address P O Box 260		Amount of Each Disbursement this Period 1000.00
City Newtonville	State MA	
Zip Code 02460	Purpose of Disbursement G-2004 U.S. House 04 MA	
Candidate Name Barney Frank	Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA District: 04		

Full Name (Last, First, Middle Initial) <b>C. Iowa Democratic Party</b>		<b>Transaction ID: B81451</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address 5661 Fleur Drive		Amount of Each Disbursement this Period 5000.00
City Des Moines	State IA	
Zip Code 50321	Purpose of Disbursement O-2004 Fed Multi-cand. Party Cmte IA	
Candidate Name	Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: IA District:	Not Applicable	

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

11000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. John Lewis for Congress Cmte</b>		<b>Transaction ID: B81452</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2004
Mailing Address 123-A Luckie Street		Amount of Each Disbursement this Period 1000.00
City Atlanta State GA Zip Code 30303	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 05 GA		
Candidate Name John Lewis		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 05	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Minnesota Democratic Farmer Labor Party</b>		<b>Transaction ID: B81453</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2004
Mailing Address 357 Wacouta Street		Amount of Each Disbursement this Period 5000.00
City St Paul State MN Zip Code 55101	011 Category/ Type	
Purpose of Disbursement O-2004 Fed Multi-cand. Party Cmte MN		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) <b>C. New Hampshire Democratic State Committee</b>		<b>Transaction ID: B81454</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2004
Mailing Address 43 Centre Street		Amount of Each Disbursement this Period 5000.00
City Concord State NH Zip Code 03301	011 Category/ Type	
Purpose of Disbursement O-2004 Fed Multi-cand. Party Cmte NH		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Democratic Party of Oregon</b>		<b>Transaction ID: B81455</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address 232 NE 9th Avenue		Amount of Each Disbursement this Period 5000.00
City Portland State OR Zip Code 97232	011 Category/ Type	
Purpose of Disbursement O-2004 Fed Multi-cand. Party Cmte OR Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: OR District: Not Applicable		

Full Name (Last, First, Middle Initial) <b>B. Paul Babbitt for Congress</b>		<b>Transaction ID: B81456</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address PO Box 23541		Amount of Each Disbursement this Period 4000.00
City Flagstaff State AZ Zip Code 86002	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 01 AZ Candidate Name Paul Babbitt		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AZ District: 01		

Full Name (Last, First, Middle Initial) <b>C. Pennsylvania Democratic Party</b>		<b>Transaction ID: B81457</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address 510 N. 3rd Street		Amount of Each Disbursement this Period 5000.00
City Harrisburg State PA Zip Code 17101	011 Category/ Type	
Purpose of Disbursement O-2004 Fed Multi-cand. Party Cmte PA Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: PA District: Not Applicable		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	14000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Richard Romero for Congress</b>		<b>Transaction ID: B81458</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address 407 Rio Grande Blvd. NW #8		Amount of Each Disbursement this Period 5000.00
City Albuquerque State NM Zip Code 87104	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 01 NM		
Candidate Name Richard Romero		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Tammy Baldwin for Congress</b>		<b>Transaction ID: B81459</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address P O Box 696		Amount of Each Disbursement this Period 1000.00
City Madison State WI Zip Code 53701	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 02 WI		
Candidate Name Tammy Baldwin		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 02	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Washington State Democratic Central Committee</b>		<b>Transaction ID: B81460</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address 616 First Avenue		Amount of Each Disbursement this Period 5000.00
City Seattle State WA Zip Code 98014	011 Category/ Type	
Purpose of Disbursement O-2004 Fed Multi-cand. Party Cmte WA		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Watson for Congress</b>		<b>Transaction ID: B81461</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address 4322 Wilshire Blvd. #302		Amount of Each Disbursement this Period 1000.00
City Los Angeles State CA Zip Code 90010		
Purpose of Disbursement G-2004 U.S. House 33 CA	011 Category/ Type	
Candidate Name Diane Watson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 33		

Full Name (Last, First, Middle Initial) <b>B. WI Dem Party</b>		<b>Transaction ID: B81462</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address 222 Washington Ave. #150		Amount of Each Disbursement this Period 5000.00
City Madison State WI Zip Code 53703		
Purpose of Disbursement O-2004 Fed Multi-cand. Party Cmte WI	011 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: WI District:	Not Applicable	

Full Name (Last, First, Middle Initial) <b>C. Velazquez to Congress</b>		<b>Transaction ID: B81463</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 4
Mailing Address 436 New Jersey Ave. SE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003		
Purpose of Disbursement G-2004 U.S. House 12 NY	011 Category/ Type	
Candidate Name Nydia Velazquez		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 12		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	117000.00