

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

Planned Parenthood Votes

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- 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 (12S)

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  08 / 01 / 2016 through  08 / 31 / 2016

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

Hubbard, Tshombe, , ,

Type or Print Name of Treasurer

Signature of Treasurer Hubbard, Tshombe, , , [Electronically Filed] Date  03 / 17 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Planned Parenthood Votes**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value=""/>	<input type="text" value="1143446.70"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="6526254.33"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="796380.00"/>	<input type="text" value="10582604.54"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="7322634.33"/>	<input type="text" value="11726051.24"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4841394.24"/>	<input type="text" value="9244811.15"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2481240.09"/>	<input type="text" value="2481240.09"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="181635.27"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Planned Parenthood Votes**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	794550.00	10569569.54
(ii) Unitemized .....	1830.00	10535.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	796380.00	10580104.54
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	796380.00	10582604.54
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	796380.00	10582604.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	796380.00	10582604.54

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1499168.69	2259372.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1499168.69	2259372.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	280000.00	413034.37
24. Independent Expenditures (use Schedule E) .....	2576567.26	4816012.06
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	1000000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1000000.00
29. Other Disbursements (Including Non-Federal Donations).....	485658.29	756392.08
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4841394.24	9244811.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4841394.24	9244811.15

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	796380.00	10582604.54
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1000000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	796380.00	9582604.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1499168.69	2259372.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1499168.69	2259372.64

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

Form/Schedule: F3XA  
Transaction ID :

After a voluntary review of our records, we are submitting this amendment to reflect the proper application of disbursements and debts owed by the committee.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 79
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Amaon, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2013 Simond Avenue, #D  
 City Austin State TX Zip Code 78723-4569  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 18 / 2016  
**Transaction ID : A2016-1736607**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Anderson, Douglas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 205  
 City La Fayette State NY Zip Code 13084-0205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 22 / 2016  
**Transaction ID : A2016-1736568**  
 Amount of Each Receipt this Period  
 700.00  
 Memo Item

**C. Baird, Bridget, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28 Old Mill Road  
 City Quaker Hill State CT Zip Code 06375-1319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 02 / 2016  
**Transaction ID : A2016-1736616**  
 Amount of Each Receipt this Period  
 50000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	51700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 79
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Beynon, Esther, , Ms.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2560 Hill Circle  
 City Colorado Springs State CO Zip Code 80904  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self - Employed Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 10 / 2016  
**Transaction ID : A2016-1736580**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Braddon-Walker, Annette, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5605 Moddison Avenue  
 City Sacramento State CA Zip Code 95819  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 05 / 2016  
**Transaction ID : A2016-1736587**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Braufman, Jill, , Ms.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 930 Meadow Lane  
 City Southampton State NY Zip Code 11968  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self - Employed Occupation (for Individual) Volunteer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 30 / 2016  
**Transaction ID : A2016-1736592**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 79
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Butler, Lauren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 99 Winchester Street #2  
 City Brookline State MA Zip Code 02245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self - Employed Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 05 / 2016  
**Transaction ID : A2016-1736593**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Clark, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1035 Kellum St, #3D  
 City Fairbanks State AK Zip Code 99701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 08 / 2016  
**Transaction ID : A2016-1736576**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Clasquin, Rani, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 911 Old Stonehedge Street  
 City West Lake Hills State TX Zip Code 78746-3529  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self - Employed Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2016  
**Transaction ID : A2016-1736606**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 79
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Clemmensen, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 243 Springvale Road  
 City Great Falls State VA Zip Code 22066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CGI Federal Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2016  
**Transaction ID : A2016-1736604**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Connelly, Serena, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3156 Brookhollow Drive  
 City Dallas State TX Zip Code 75234-6486  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Contran Corp Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300000.00

Date of Receipt 08 / 25 / 2016  
**Transaction ID : A2016-1736591**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item

**C. Crowell, Areta, , Dr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 995 East Green Street, #311  
 City Pasadena State CA Zip Code 91106-2410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2016  
**Transaction ID : A2016-1736598**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	101000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 79
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Davis, J., , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 185 Forest Avenue #2C

City Palo Alto	State CA	Zip Code 94301
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MBA-Nonprofit Connection	Occupation (for Individual) Administrator
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

**Transaction ID : A2016-1736577**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. Dupuis, Mary, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5600 Pioneers Boulevard, #340

City Lincoln	State NE	Zip Code 68506-5179
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) None	Occupation (for Individual) Retired
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2016

**Transaction ID : A2016-1736571**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Emmet, Lucinda, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 Cornwall Street NE

City Leesburg	State VA	Zip Code 20176
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) None	Occupation (for Individual) Retired
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

**Transaction ID : A2016-1736574**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 79
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Espenscheid, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12515 NW Jackson Quarry Rd  
 City Hillsboro State OR Zip Code 97124-8004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self - Employed Occupation (for Individual) Information requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 08 / 02 / 2016  
**Transaction ID : A2016-1736601**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item

**B. Fleischaker, Pam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1557 Upper Canyon Road  
 City Santa Fe State NM Zip Code 87501-6135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 29 / 2016  
**Transaction ID : A2016-1736599**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Fogelberg, Shirley P., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25135 Greenbrooke Drive  
 City Southfield State MI Zip Code 48033-5283  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 05 / 2016  
**Transaction ID : A2016-1736583**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 79
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Planned Parenthood Votes**

**A. Friedberg, Richard, , Dr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 452 Riverside Drive, #93  
 City New York State NY Zip Code 10027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Doctor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : A2016-1736570**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Grapentine, Lori, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2128 Commonwealth Ave  
 City Madison State WI Zip Code 53726-3956  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 05 / 2016  
**Transaction ID : A2016-1736618**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Hanauer, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 95 Forest Lane  
 City Berkeley State CA Zip Code 94708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Nonsmokers Occupation (for Individual) Analyst  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 10 / 2016  
**Transaction ID : A2016-1736602**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 79
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Hellebrand-Blood, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 708 S American Street  
 City Philadelphia State PA Zip Code 19147-3301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : A2016-1736614**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item

**B. Hill, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1558 Regent Drive  
 City Brentwood State CA Zip Code 94513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2016  
**Transaction ID : A2016-1736613**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Hill, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6532 Flagstaff Road  
 City Boulder State CO Zip Code 80302-9514  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) University Of Kansas Occupation (for Individual) Educator  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2016  
**Transaction ID : A2016-1736617**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	16250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 15 OF 79  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A. Hoagland, Alison, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 350 9th Street, SE, #12  
 City Washington State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 15 / 2016  
**Transaction ID : A2016-1736572**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

**B. Johns, Gordon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 621 N Granados Avenue  
 City Solana Beach State CA Zip Code 92075-1218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 22 / 2016  
**Transaction ID : A2016-1736610**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Johns, Lucy, , Ms.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 561 Greenwich Street  
 City San Francisco State CA Zip Code 94133-2949  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self - Employed Occupation (for Individual) Planner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 01 / 2016  
**Transaction ID : A2016-1736590**  
 Amount of Each Receipt this Period 750.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 51750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 79
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Katz, Vern, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 181 W 22nd Avenue  
 City Eugene State OR Zip Code 97405-2813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) DOCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 08 / 05 / 2016  
**Transaction ID : A2016-1736586**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Knopper, Karen, L, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 255 Greenwood St  
 City Birmingham State MI Zip Code 48009-1339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self - Employed Occupation (for Individual) Information requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 01 / 2016  
**Transaction ID : A2016-1736578**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

**C. Laufer, Henry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1750 S Ocean Boulevard  
 City Lantana State FL Zip Code 33462-6222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information requested  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 11 / 2016  
**Transaction ID : A2016-1736597**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	101600.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 OF 79
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Lichtenstein, Dorothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 745 Washington Street  
 City New York State NY Zip Code 10014-2042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self - Employed Occupation (for Individual) Information requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900000.00

Date of Receipt 08 / 26 / 2016  
**Transaction ID : A2016-1736588**  
 Amount of Each Receipt this Period 400000.00  
 Memo Item

**B. Moody, Meredith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 241 Sunnybrook Farm Road  
 City Narragansett State RI Zip Code 02882  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 25 / 2016  
**Transaction ID : A2016-1736603**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Peet, Margot, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3100 Hawthorne St, NW  
 City Washington State DC Zip Code 20008-3539  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Mitre Corp Occupation (for Individual) Engineer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 11 / 2016  
**Transaction ID : A2016-1736605**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	402000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 79
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Pettingill, Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4228 Aldrich Avenue S  
 City Minneapolis State MN Zip Code 55409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Wells Fargo Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 18 / 2016  
**Transaction ID : A2016-1736584**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Rosenblum, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2424 Edenborn Avenue, #260  
 City Metairie State LA Zip Code 70001-6472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 09 / 2016  
**Transaction ID : A2016-1736620**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Savin, Nathan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 735 George Street  
 City Iowa City State IA Zip Code 52246-5006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016  
**Transaction ID : A2016-1736585**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 79
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Schwartz, Yael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1206 Powhattan Avenue  
 City San Francisco State CA Zip Code 94110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SAN FRANCISCO SCHOL.SYSTM Occupation (for Individual) Librarian  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2016  
**Transaction ID : A2016-1736600**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Vaughan, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1976 Sheridan Avenue, S  
 City Minneapolis State MN Zip Code 55405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Woodlake Medical Cli Occupation (for Individual) Doctor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 08 / 2016  
**Transaction ID : A2016-1736575**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Weber, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 East 71st Street, #2B  
 City New York State NY Zip Code 10021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Littler Mendelson Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 02 / 2016  
**Transaction ID : A2016-1736609**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 20 OF 79  
(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 Votes**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wells, Walter, G, Mr.,

Mailing Address 3152 Gracefield Road #401

City Silver Spring	State MD	Zip Code 20904
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) None	Occupation (for Individual) Retired
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		11		2016

**Transaction ID : A2016-1736569**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	794550.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Stones Phone**

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

City Rancho Mirage State CA Zip Code 92270

Purpose of Disbursement Research Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District: Not Applicable

Date of Disbursement: 08 / 05 / 2016

FEC Identification Number: C

Transaction ID : B626934

Amount of Each Disbursement this Period: 5463.25

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stott Development Solutions Group, Inc**

Mailing Address 3605 Wilshire Ave

City San Mateo State CA Zip Code 94403

Purpose of Disbursement Fundraising Consultant

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District: Not Applicable

Date of Disbursement: 08 / 16 / 2016

FEC Identification Number: C

Transaction ID : B626764

Amount of Each Disbursement this Period: 10000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Catalist LLC**

Mailing Address 1090 Vermont Ave./Ste. 300

City Washington State DC Zip Code 20006

Purpose of Disbursement Database Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District: Not Applicable

Date of Disbursement: 08 / 05 / 2016

FEC Identification Number: C

Transaction ID : B626751

Amount of Each Disbursement this Period: 6300.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 21763.25

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Analyst Institute LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2016	
Mailing Address 815 16th Street, NW		FEC Identification Number C [REDACTED] <b>Transaction ID : B626765</b> Amount of Each Disbursement this Period 7694.55	
City Washington	State DC	Zip Code 20006	Category/ Type 001
Purpose of Disbursement Research Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Analyst Institute LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2016	
Mailing Address 815 16th Street, NW		FEC Identification Number C [REDACTED] <b>Transaction ID : B626767</b> Amount of Each Disbursement this Period 2428.00	
City Washington	State DC	Zip Code 20006	Category/ Type 001
Purpose of Disbursement Reimbursement for Travel Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Catalist LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2016	
Mailing Address 1090 Vermont Ave./Ste. 300		FEC Identification Number C [REDACTED] <b>Transaction ID : B626754</b> Amount of Each Disbursement this Period 187.50	
City Washington	State DC	Zip Code 20006	Category/ Type 001
Purpose of Disbursement Database Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10310.05
<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)

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

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

Full Name (Last, First, Middle Initial)

**A. Catalyst LLC**

Mailing Address 1090 Vermont Ave./Ste. 300

City Washington State DC Zip Code 20006

Purpose of Disbursement Database Services

Category/Type

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B626757**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. O'Brien Garrett (formerly known as OMP Inc.)**

Mailing Address 1133 19th St. NW #300

City Washington State DC Zip Code 20036

Purpose of Disbursement Advance payment for fundraising mailer

Category/Type

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B626776**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Community Outreach Group LLC**

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement Prepayment for future IEs.

Category/Type

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B626875**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Project New America**

Full Name (Last, First, Middle Initial)

Mailing Address 191 University Blvd #831

City Denver State CO Zip Code 80206

Purpose of Disbursement Research Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District: Not Applicable

Date of Disbursement 08 / 26 / 2016

FEC Identification Number C

Transaction ID : B626763

Amount of Each Disbursement this Period 5000.00

Memo Item

**B. Civis**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4042

City Chicago State IL Zip Code 60654

Purpose of Disbursement Database Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District: Not Applicable

Date of Disbursement 08 / 24 / 2016

FEC Identification Number C

Transaction ID : B626759

Amount of Each Disbursement this Period 1924.00

Memo Item

**C. Rath, Young and Pignatelli**

Full Name (Last, First, Middle Initial)

Mailing Address One Capital Plaza

City Concord State MA Zip Code 03302

Purpose of Disbursement Legal Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District: Not Applicable

Date of Disbursement 08 / 22 / 2016

FEC Identification Number C

Transaction ID : B626773

Amount of Each Disbursement this Period 617.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7541.50

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Planned Parenthood Action Fund Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2016
Mailing Address 123 William St, 10th Floor		FEC Identification Number C [ ] <b>Transaction ID : B626740</b> Amount of Each Disbursement this Period [ ] 95969.09
City New York	State NY	Zip Code 10038
Purpose of Disbursement Reimbursement for Program Staff time		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Planned Parenthood Action Fund Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2016
Mailing Address 123 William St, 10th Floor		FEC Identification Number C [ ] <b>Transaction ID : B626743</b> Amount of Each Disbursement this Period [ ] 44622.13
City New York	State NY	Zip Code 10038
Purpose of Disbursement Reimbursement for Event Space Rental		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Planned Parenthood Action Fund Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2016
Mailing Address 123 William St, 10th Floor		FEC Identification Number C [ ] <b>Transaction ID : B626744</b> Amount of Each Disbursement this Period [ ] 254091.12
City New York	State NY	Zip Code 10038
Purpose of Disbursement Reimbursement for Program Staff time		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	
State: District:		

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

[ ] 394682.34

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

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Planned Parenthood Action Fund Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2016	
Mailing Address 123 William St, 10th Floor			
City New York	State NY	Zip Code 10038	
Purpose of Disbursement Reimbursement for Database Services		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		<input type="text" value="001"/> Category/ Type	<b>Transaction ID : B626746</b> Amount of Each Disbursement this Period <input type="text" value="1760.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. R.A. Palmer Products Co. Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2016	
Mailing Address 2808 Broadway Blvd.			
City Monroeville	State PA	Zip Code 15146	
Purpose of Disbursement Promotional Materials		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		<input type="text" value="001"/> Category/ Type	<b>Transaction ID : B626779</b> Amount of Each Disbursement this Period <input type="text" value="547.05"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Blackbaud Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2016	
Mailing Address 2000 Daniel Island Drive			
City Charleston	State SC	Zip Code 29492	
Purpose of Disbursement Merchant Fees		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		<input type="text" value="001"/> Category/ Type	<b>Transaction ID : B626800</b> Amount of Each Disbursement this Period <input type="text" value="909.82"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		<input type="checkbox"/> Memo Item
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text" value="3216.87"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Blackbaud Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2016	
Mailing Address 2000 Daniel Island Drive		FEC Identification Number C [REDACTED] <b>Transaction ID : B626802</b> Amount of Each Disbursement this Period [REDACTED] 130.16	
City Charleston	State SC	Zip Code 29492	Category/Type 001
Purpose of Disbursement Merchant Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Blackbaud Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2016	
Mailing Address 2000 Daniel Island Drive		FEC Identification Number C [REDACTED] <b>Transaction ID : B626804</b> Amount of Each Disbursement this Period [REDACTED] 389.96	
City Charleston	State SC	Zip Code 29492	Category/Type 001
Purpose of Disbursement Merchant Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Bank of America</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2016	
Mailing Address P.O. Box 27025		FEC Identification Number C [REDACTED] <b>Transaction ID : B626735</b> Amount of Each Disbursement this Period [REDACTED] 1604.56	
City Richmond	State VA	Zip Code 23261	Category/Type 001
Purpose of Disbursement Merchant Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2124.68
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Votes NW and Hawaii**

Mailing Address PO Box 21544

City Seattle State WA Zip Code 98111

Purpose of Disbursement  
Reimbursement for Travel Expenses

001  
 002  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼ Not Applicable

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 10 / 2016

FEC Identification Number

C  
Transaction ID : B626760  
Amount of Each Disbursement this Period  
124.57

Memo Item

Full Name (Last, First, Middle Initial)

**B. Precision Strategies**

Mailing Address 1121 14th Street NW, Suite 700

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Database Services

001  
 001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼ Not Applicable

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 17 / 2016

FEC Identification Number

C  
Transaction ID : B627068  
Amount of Each Disbursement this Period  
2025.00

Memo Item

Full Name (Last, First, Middle Initial)

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

Mailing Address 123 William St, 10th Floor

City New York State NY Zip Code 10038

Purpose of Disbursement  
In-Kind: Program Staff Time

001  
 001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼ Not Applicable

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2016

FEC Identification Number

C  
Transaction ID : B627063  
Amount of Each Disbursement this Period  
-1600.62

Memo Item

Drawdown on advance to PPAF originally reported on 2016 M5 report. See line 29

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

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

548.95

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Florida Alliance of Planned Parenthood Affiliates**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	05	/	2016

Mailing Address 122 S Calhoun St

FEC Identification Number

C [ ]

**Transaction ID : B626894**  
Amount of Each Disbursement this Period

[ ] 7647.45

Memo Item

City Tallahassee State FL Zip Code 32301

Purpose of Disbursement  
Consultant: Messaging and Strategy

[ ] 001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. O'Brien Garrett (formerly known as OMP Inc.)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2016

Mailing Address 1133 19th St. NW #300

FEC Identification Number

C [ ]

**Transaction ID : B620244**  
Amount of Each Disbursement this Period

[ ] 19042.10

Memo Item

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Full payment for printing of fundraising mailer (B620244) rpted on M7. See Sched D

[ ] 001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Other (specify) Not Applicable

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
[ ]	/	[ ]	/	[ ]

Mailing Address

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

City State Zip Code

Purpose of Disbursement

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

[ ] 26689.55

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

[ ] 1499170.58

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. Michigan Planned Parenthood Votes**

Mailing Address 115 W Allegan Ste. 500

City Lansing State MI Zip Code 48933

Purpose of Disbursement Contribution

011  
Category/Type

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
08 / 18 / 2016

FEC Identification Number

C C00568931

Transaction ID : B626722

Amount of Each Disbursement this Period

100000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Planned Parenthood Advocates of Wisconsin Inc.**

Mailing Address 111 King St.#23

City Madison State WI Zip Code 53701

Purpose of Disbursement Contribution

011  
Category/Type

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
08 / 24 / 2016

FEC Identification Number

C C90008673

Transaction ID : B626720

Amount of Each Disbursement this Period

180000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

280000.00

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

280000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Planned Parenthood Votes**

Full Name (Last, First, Middle Initial)

**A. Women's Voices Women Vote**

Mailing Address 1707 L St. NW/St. 300

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Contribution for non-candidate specific GOTV mail

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2016

FEC Identification Number

C

Transaction ID : B626729

Amount of Each Disbursement this Period

45557.67

Memo Item

Full Name (Last, First, Middle Initial)

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

Mailing Address 1171 7th St

City  
Des Moines

State  
IA

Zip Code  
50322

Purpose of Disbursement  
Contribution to Non-federal State Committee in IA

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2016

FEC Identification Number

C

Transaction ID : B626731

Amount of Each Disbursement this Period

25000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Planned Parenthood Advocates of MT**

Mailing Address 2525 Fourth Avenue North Suite 201

City  
Billings

State  
MT

Zip Code  
59101

Purpose of Disbursement  
Contribution to non-federal state committee in MT

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2016

FEC Identification Number

C

Transaction ID : B626725

Amount of Each Disbursement this Period

200000.00

Memo Item

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

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

270557.67

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Planned Parenthood New Hampshire Action Fund</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2016
Mailing Address 18 Low Avenue		FEC Identification Number C [ ] <b>Transaction ID : B626723</b> Amount of Each Disbursement this Period [ ] 83500.00
City Concord	State NH	Zip Code 03301
Purpose of Disbursement Contribution to non-federal state committee in NH		Category/ Type 011
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Planned Parenthood Texas Votes PAC</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2016
Mailing Address 201 E Ben White Blvd., Bldg B, Sui		FEC Identification Number C [ ] <b>Transaction ID : B626726</b> Amount of Each Disbursement this Period [ ] 50000.00
City Austin	State TX	Zip Code 78704
Purpose of Disbursement Contribution to non-federal state committee in TX		Category/ Type 011
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Planned Parenthood Advocates of WI Political Fund</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2016
Mailing Address 302 N Jackson St		FEC Identification Number C [ ] <b>Transaction ID : B626724</b> Amount of Each Disbursement this Period [ ] 80000.00
City Milwaukee	State WI	Zip Code 53202
Purpose of Disbursement Contribution to non-federal state committee in WI		Category/ Type 011
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 213500.00
<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)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. Planned Parenthood Advocates of MT**

Full Name (Last, First, Middle Initial)

Mailing Address 2525 Fourth Avenue North Suite 201

City Billings State MT Zip Code 59101

Purpose of Disbursement In-Kind: Program Staff Time

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 08 / 31 / 2016

FEC Identification Number: C

Transaction ID : B627059

Amount of Each Disbursement this Period: 1600.62

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1600.62
<b>TOTAL</b> This Period (last page this line number only).....	485658.29

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 34 OF 79
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MackCrouse Group</b>			Nature of Debt (Purpose): Canvass literature
Mailing Address 2001 N. Beauregard St. Ste 420			
City Alexandria	State VA	Zip Code 22311	

Outstanding Balance Beginning This Period <input type="text" value="3950.00"/>	<b>Transaction ID : D439020</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3950.00"/>

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

Outstanding Balance Beginning This Period <input type="text" value="2050.00"/>	<b>Transaction ID : D439021</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2050.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SKDKnickerbocker LLC</b>			Nature of Debt (Purpose): Production Fees: Television Advertisement. Beginning debt balance adj. per actual amt owed and paid
Mailing Address 1150 18th Street NW/Ste. 800			
City Washington	State DC	Zip Code 20036	

Outstanding Balance Beginning This Period <input type="text" value="21794.22"/>	<b>Transaction ID : D439027</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="21794.22"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3950.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 35 OF 79
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>O'Brien Garrett (formerly known as OMP Inc.)</b>			Nature of Debt (Purpose): Printing of IE mail piece and fundraising mailer. See schedule E
Mailing Address 1133 19th St. NW #300			
City Washington	State DC	Zip Code 20036	

Outstanding Balance Beginning This Period	Transaction ID : <b>D439029</b>	
23788.68		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
8109.31	31897.99	0.00

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

Outstanding Balance Beginning This Period	Transaction ID : <b>D439030</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
112.58	0.00	112.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Drew &amp; Rogers Inc.</b>			Nature of Debt (Purpose): Printing and Shipping. See schedule E
Mailing Address 30 Plymouth Street			
City Fairfield	State NJ	Zip Code 07004	

Outstanding Balance Beginning This Period	Transaction ID : <b>D439031</b>	
7819.54		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	7819.54	0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	112.58
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 36 OF 79
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Alliance Marketing Distributor Inc.</b>			Nature of Debt (Purpose): Printing of postcards and posters See schedule E
Mailing Address 133 Industrial Ave.			
City Hasbrouck Heights	State NJ	Zip Code 07604	

Outstanding Balance Beginning This Period 884.58	Transaction ID : D439032	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 884.58

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Network Solutions</b>			Nature of Debt (Purpose): Purchase of domain name. See schedule E
Mailing Address 13861 Sunrise Valley Dr. #300			
City Herndon	State VA	Zip Code 20171	

Outstanding Balance Beginning This Period 15.99	Transaction ID : D439033	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Community Outreach Group LLC</b>			Nature of Debt (Purpose): Canvassing, Visibility Events. See schedule E
Mailing Address 1110 Vermont Ave. NW #300			
City Washington	State DC	Zip Code 20005	

Outstanding Balance Beginning This Period 246004.52	Transaction ID : D439034	
Amount Incurred This Period 0.00	Payment This Period 246004.52	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	900.57
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 37 OF 79
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Planned Parenthood Action Fund Inc.</b>			Nature of Debt (Purpose): Event tickets, staff time, video footage. See schedule E
Mailing Address 123 William St. 10th Flr			
City New York	State NY	Zip Code 10038	

Outstanding Balance Beginning This Period 5629.44	<b>Transaction ID : D439035</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5629.44

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

Outstanding Balance Beginning This Period 2500.00	<b>Transaction ID : D439036</b>	
Amount Incurred This Period 0.00	Payment This Period 2500.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Planned Parenthood Advocates of Ohio</b>			Nature of Debt (Purpose): Canvassing. See schedule E
Mailing Address 206 E. State Street			
City Columbus	State OH	Zip Code 43215	

Outstanding Balance Beginning This Period 18917.37	<b>Transaction ID : D439037</b>	
Amount Incurred This Period 59414.21	Payment This Period 0.00	Outstanding Balance at Close of This Period 78331.58

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	83961.02
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 38 OF 79
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Planned Parenthood Rocky Mountains Action Fund</b>			Nature of Debt (Purpose): Events. See schedule E
Mailing Address 7155 E. 38th Avenue			
City Denver	State CO	Zip Code 80207	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D439038</b>	
Amount Incurred This Period 12411.10	Payment This Period 0.00	Outstanding Balance at Close of This Period 12411.10

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Latino Decisions</b>			Nature of Debt (Purpose): Polling. See schedule E
Mailing Address 15 South Grady Way, Suite 620			
City Seattle	State WA	Zip Code 98057	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D439039</b>	
Amount Incurred This Period 55300.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 55300.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Planned Parenthood Pennsylvania Advocates</b>			Nature of Debt (Purpose): Phone calls, events, Consultant: strategy and messaging, canvassing. See schedule E
Mailing Address 1514 North 2nd Street			
City Harrisburg	State PA	Zip Code 17102	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D439040</b>	
Amount Incurred This Period 25000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 25000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	92711.10
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	181635.27
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	181635.27

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

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

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

Full Name of Payee <b>Community Outreach Group LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1110 Vermont Ave N.W. #300	Amount <input type="text"/>
City Washington State DC Zip Code 20005	Transaction ID : <b>B621421</b>
Purpose of Expenditure Canvassing Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Portman, Rob, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 243957.69	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Community Outreach Group LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1110 Vermont Ave N.W. #300	Amount <input type="text"/>
City Washington State DC Zip Code 20005	Transaction ID : <b>B621422</b>
Purpose of Expenditure Canvassing Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Strickland, Ted, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 239493.69	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text"/> 140738.16
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(a) TOTAL Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

/  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee
Community Outreach Group LLC
Mailing Address 1110 Vermont Ave N.W. #300
City Washington State DC Zip Code 20005
Purpose of Expenditure
Canvassing Category/Type 004
Date of Public Distribution/Dissemination 08/02/2016
Amount 70369.08
Transaction ID: B621423
Date of Disbursement or Obligation 08/02/2016

Name of Federal Candidate:
Clinton, Hillary, ,
Support Oppose
Office Sought: House District:
President Senate State: US
Calendar Year-To-Date
Per Election for Office Sought 211584.14
Disbursement For: Primary General 2016
Other (specify)

Full Name of Payee
Community Outreach Group LLC
Mailing Address 1110 Vermont Ave N.W. #300
City Washington State DC Zip Code 20005
Purpose of Expenditure
Canvassing Category/Type 004
Date of Public Distribution/Dissemination 08/02/2016
Amount 70369.08
Transaction ID: B621424
Date of Disbursement or Obligation 08/02/2016

Name of Federal Candidate:
Trump, Donald, ,
Support Oppose
Office Sought: House District:
President Senate State: US
Calendar Year-To-Date
Per Election for Office Sought 134329.75
Disbursement For: Primary General 2016
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 140738.16
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, ,

[Electronically Filed]

Date

03/17/2017

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee: Planned Parenthood Advocates of Ohio MEMO
Mailing Address: 206 E State St.
City: Columbus State: OH Zip Code: 43215
Purpose of Expenditure: Canvassing. See Schedule D
Category/Type: 004
Name of Federal Candidate: Clinton, Hillary, , , Support
Office Sought: President
Disbursement For: General
Amount: 8912.13
Transaction ID: B621425
Date of Disbursement or Obligation: 08/02/2016
Calendar Year-To-Date Per Election for Office Sought: 211584.14

Full Name of Payee: Planned Parenthood Advocates of Ohio MEMO
Mailing Address: 206 E State St.
City: Columbus State: OH Zip Code: 43215
Purpose of Expenditure: Canvassing. See Schedule D
Category/Type: 004
Name of Federal Candidate: Trump, Donald, , , Oppose
Office Sought: President
Disbursement For: General
Amount: 8912.13
Transaction ID: B621426
Date of Disbursement or Obligation: 08/02/2016
Calendar Year-To-Date Per Election for Office Sought: 134329.75

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

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

03 / 17 / 2017

Signature

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

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00489799                 </div>
--	--

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Advocates of Ohio</b> MEMO	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 08 / 02 / 2016						
Mailing Address 206 E State St.	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8912.13</div> Transaction ID : <b>B621427</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 08 / 02 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Columbus</td> <td>OH</td> <td>43215</td> </tr> </table>		City	State	Zip Code	Columbus	OH	43215
City		State	Zip Code				
Columbus	OH	43215					
Purpose of Expenditure Canvassing. See Schedule D							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Strickland, Ted, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>OH</u>						
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">239493.69</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Advocates of Ohio</b> MEMO	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 08 / 02 / 2016						
Mailing Address 206 E State St.	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8912.13</div> Transaction ID : <b>B621428</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 08 / 02 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Columbus</td> <td>OH</td> <td>43215</td> </tr> </table>		City	State	Zip Code	Columbus	OH	43215
City		State	Zip Code				
Columbus	OH	43215					
Purpose of Expenditure Canvassing. See Schedule D							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Portman, Rob, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>OH</u>						
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">243957.69</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Hubbard, Tshombe, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee: Planned Parenthood Advocates of Ohio MEMO
Mailing Address: 206 E State St.
City: Columbus State: OH Zip Code: 43215
Purpose of Expenditure: Phone calls. See Schedule D
Category/Type: 004
Name of Federal Candidate: Portman, Rob, , , Support: [ ], Oppose: [x]
Office Sought: [ ] House [x] Senate State: OH
Calendar Year-To-Date Per Election for Office Sought: 243957.69
Disbursement For: [ ] Primary [x] General 2016 [ ] Other (specify)

Full Name of Payee: Planned Parenthood Advocates of Ohio MEMO
Mailing Address: 206 E State St.
City: Columbus State: OH Zip Code: 43215
Purpose of Expenditure: Phone calls. See Schedule D
Category/Type: 004
Name of Federal Candidate: Strickland, Ted, , , Support: [x] Oppose: [ ]
Office Sought: [ ] House [x] Senate State: OH
Calendar Year-To-Date Per Election for Office Sought: 239493.69
Disbursement For: [ ] Primary [x] General 2016 [ ] Other (specify)

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

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

03 / 17 / 2017

Signature

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

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00489799                 </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Advocates of Ohio</b> MEMO	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 02 / 2016						
Mailing Address 206 E State St.	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4456.07</div> Transaction ID : <b>B621431</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 02 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Columbus</td> <td>OH</td> <td>43215</td> </tr> </table>		City	State	Zip Code	Columbus	OH	43215
City		State	Zip Code				
Columbus	OH	43215					
Purpose of Expenditure Phone calls. See Schedule D							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Trump, Donald, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>						
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">134329.75</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Advocates of Ohio</b> MEMO	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 02 / 2016						
Mailing Address 206 E State St.	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4456.07</div> Transaction ID : <b>B621432</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 02 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Columbus</td> <td>OH</td> <td>43215</td> </tr> </table>		City	State	Zip Code	Columbus	OH	43215
City		State	Zip Code				
Columbus	OH	43215					
Purpose of Expenditure Phone calls. See Schedule D							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>						
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">211584.14</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Hubbard, Tshombe, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee: Planned Parenthood Advocates of Ohio MEMO
Mailing Address: 206 E State St.
City: Columbus State: OH Zip Code: 43215
Purpose of Expenditure: Events. See Schedule D
Category/Type: 004
Name of Federal Candidate: Clinton, Hillary, , , Support
Office Sought: President State: US
Calendar Year-To-Date Per Election for Office Sought: 211584.14
Disbursement For: General 2016

Full Name of Payee: Planned Parenthood Rocky Mountains Action Fund MEMO
Mailing Address: 7155 E. 38th Avenue
City: Denver State: CO Zip Code: 80207
Purpose of Expenditure: Phone calls. See Schedule D
Category/Type: 004
Name of Federal Candidate: Clinton, Hillary, , , Support
Office Sought: President State: US
Calendar Year-To-Date Per Election for Office Sought: 297682.56
Disbursement For: General 2016

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

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

03 / 17 / 2017

Signature

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

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

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

Full Name of Payee <b>Planned Parenthood Rocky Mountains Action Fund</b> MEMO	<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 03 / 2016
Mailing Address 7155 E. 38th Avenue		Amount 2792.50
City Denver	State CO	
Purpose of Expenditure Phone calls. See Schedule D	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 03 / 2016
Name of Federal Candidate: Trump, Donald, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US
Calendar Year-To-Date Per Election for Office Sought	193936.37	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Planned Parenthood Rocky Mountains Action Fund</b> MEMO	<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 03 / 2016
Mailing Address 7155 E. 38th Avenue		Amount 2792.50
City Denver	State CO	
Purpose of Expenditure Phone calls. See Schedule D	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 03 / 2016
Name of Federal Candidate: Heck, Joseph, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV
Calendar Year-To-Date Per Election for Office Sought	124329.05	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

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

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date MM / DD / YYYY  
03 / 17 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee
Planned Parenthood Rocky Mountains Action Fund
MEMO
Mailing Address 7155 E. 38th Avenue
City Denver State CO Zip Code 80207
Purpose of Expenditure Phone calls. See Schedule D
Category/Type 004
Date of Public Distribution/Dissemination 08/03/2016
Amount 2792.50
Transaction ID: B621449
Date of Disbursement or Obligation 08/03/2016

Name of Federal Candidate: Cortez-Masto, Catherine, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 76102.90

Full Name of Payee
Planned Parenthood Rocky Mountains Action Fund
MEMO
Mailing Address 7155 E. 38th Avenue
City Denver State CO Zip Code 80207
Purpose of Expenditure Events. See Schedule D
Category/Type 004
Date of Public Distribution/Dissemination 08/03/2016
Amount 1241.10
Transaction ID: B621450
Date of Disbursement or Obligation 08/03/2016

Name of Federal Candidate: Clinton, Hillary, ,
Support Oppose
Office Sought: President Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 297682.56

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

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, ,

[Electronically Filed]

Date 03/17/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee
Community Outreach Group LLC
Mailing Address
1110 Vermont Ave N.W. #300
City
Washington State
DC Zip Code
20005
Purpose of Expenditure
Canvassing Category/Type
004
Date of Public Distribution/Dissemination
08 / 03 / 2016
Amount
25250.72
Transaction ID : B621437
Date of Disbursement or Obligation
08 / 17 / 2016

Name of Federal Candidate:
Clinton, Hillary, ,
Support Oppose
Office Sought:
House District:
President Senate State: US
Calendar Year-To-Date
Per Election for Office Sought
297682.56
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Community Outreach Group LLC
Mailing Address
1110 Vermont Ave N.W. #300
City
Washington State
DC Zip Code
20005
Purpose of Expenditure
Phone Calls Category/Type
004
Date of Public Distribution/Dissemination
08 / 03 / 2016
Amount
31563.40
Transaction ID : B621439
Date of Disbursement or Obligation
08 / 17 / 2016

Name of Federal Candidate:
Clinton, Hillary, ,
Support Oppose
Office Sought:
House District:
President Senate State: US
Calendar Year-To-Date
Per Election for Office Sought
297682.56
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
56814.12
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, ,

[Electronically Filed]

Date

03 / 17 / 2017

Signature



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

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

Full Name of Payee <b>Community Outreach Group LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1110 Vermont Ave N.W. #300	Amount <input type="text"/>
City Washington State DC Zip Code 20005	Transaction ID : <b>B621440</b>
Purpose of Expenditure Phone calls Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Trump, Donald, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 193936.37	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Community Outreach Group LLC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1110 Vermont Ave N.W. #300	Amount <input type="text"/>
City Washington State DC Zip Code 20005	Transaction ID : <b>B621441</b>
Purpose of Expenditure Phone calls Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Cortez-Masto, Catherine, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 76102.90	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text"/> 63126.80
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(a) TOTAL Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , , [Electronically Filed] Date  /  /

Signature

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

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

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

Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1110 Vermont Ave N.W. #300		Amount <input type="text"/>
City Washington	State DC	Zip Code 20005
Purpose of Expenditure Phone calls		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Heck, Joseph, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 124329.05		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1110 Vermont Ave N.W. #300		Amount <input type="text"/>
City Washington	State DC	Zip Code 20005
Purpose of Expenditure Events		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Clinton, Hillary, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 297682.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 56814.10
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Hubbard, Tshombe, , ,*

**[Electronically Filed]**

Date

/  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee
Community Outreach Group LLC
Mailing Address 1110 Vermont Ave N.W. #300
City Washington State DC Zip Code 20005
Purpose of Expenditure
Canvassing Category/Type 004
Date of Public Distribution/Dissemination 08/03/2016
Amount 25250.72
Transaction ID : B621434
Date of Disbursement or Obligation 08/17/2016

Name of Federal Candidate:
Heck, Joseph, , ,
Support Oppose
Office Sought: House District:
President Senate State: NV
Calendar Year-To-Date
Per Election for Office Sought 124329.05
Disbursement For: Primary General
2016 Other (specify)

Full Name of Payee
Community Outreach Group LLC
Mailing Address 1110 Vermont Ave N.W. #300
City Washington State DC Zip Code 20005
Purpose of Expenditure
Canvassing Category/Type 004
Date of Public Distribution/Dissemination 08/03/2016
Amount 25250.72
Transaction ID : B621435
Date of Disbursement or Obligation 08/17/2016

Name of Federal Candidate:
Cortez-Masto, Catherine, , ,
Support Oppose
Office Sought: House District:
President Senate State: NV
Calendar Year-To-Date
Per Election for Office Sought 76102.90
Disbursement For: Primary General
2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 50501.44
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

03/17/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee: Community Outreach Group LLC
Mailing Address: 1110 Vermont Ave N.W. #300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Canvassing
Category/Type: 004
Name of Federal Candidate: Trump, Donald, ,
Disbursement For: General 2016
Amount: 25250.72
Transaction ID: B621436

Full Name of Payee: Latino Decisions MEMO
Mailing Address: 15 South Grady Way, Suite 620
City: Seattle State: WA Zip Code: 98057
Purpose of Expenditure: Polling. See Schedule D
Category/Type: 004
Name of Federal Candidate: Clinton, Hillary, ,
Disbursement For: General 2016
Amount: 14050.00
Transaction ID: B621451

(a) SUBTOTAL of Itemized Independent Expenditures: 25250.72
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Hubbard, Tshombe, ,

[Electronically Filed]

Date

03 / 17 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee Latino Decisions MEMO
Mailing Address 15 South Grady Way, Suite 620
City Seattle State WA Zip Code 98057
Purpose of Expenditure Polling. See Schedule D
Category/Type 004
Date of Public Distribution/Dissemination 08/04/2016
Amount 14050.00
Transaction ID: B621452
Date of Disbursement or Obligation 08/04/2016
Name of Federal Candidate: Trump, Donald, , , Support Oppose
Office Sought: President Senate State: US
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Community Outreach Group LLC
Mailing Address 1110 Vermont Ave N.W. #300
City Washington State DC Zip Code 20005
Purpose of Expenditure Full payment of transaction B621019 originally reported on 2016 FEC M8 report. See Schedule D
Category/Type 004
Date of Public Distribution/Dissemination 07/27/2016
Amount 56501.13
Transaction ID: B621019
Date of Disbursement or Obligation 08/05/2016
Name of Federal Candidate: Trump, Donald, , , Support Oppose
Office Sought: President Senate State: US
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 56501.13
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

03 / 17 / 2017

Signature

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

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00489799                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 07 / 27 / 2016					
Mailing Address 1110 Vermont Ave N.W. #300	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">56501.13</div>					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005</td> </tr> </table>		City	State	Zip Code	Washington	DC
City	State	Zip Code				
Washington	DC	20005				
Purpose of Expenditure Full payment of transaction B621020 originally reported on 2016 FEC M8 report. See Schedule D	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>					
Name of Federal Candidate: Clinton, Hillary, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> District: _____ State: <u>US</u>					
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">372195.56</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____					

Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 07 / 27 / 2016					
Mailing Address 1110 Vermont Ave N.W. #300	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">56501.13</div>					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005</td> </tr> </table>		City	State	Zip Code	Washington	DC
City	State	Zip Code				
Washington	DC	20005				
Purpose of Expenditure Full payment of transaction B621021 originally reported on 2016 FEC M8 report. See Schedule D	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>					
Name of Federal Candidate: Strickland, Ted, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: <u>OH</u>					
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">295994.82</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____					

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">113002.26</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Hubbard, Tshombe, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 03 / 17 / 2017

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee
Community Outreach Group LLC
Mailing Address 1110 Vermont Ave N.W. #300
City Washington State DC Zip Code 20005
Purpose of Expenditure
Full payment of transaction B621022 originally reported on
2016 FEC M8 report. See Schedule D
Category/Type 004
Date of Public Distribution/Dissemination 07/27/2016
Amount 56501.13
Transaction ID : B621022
Date of Disbursement or Obligation 08/05/2016

Name of Federal Candidate:
Portman, Rob, ,
Support Oppose
Office Sought: House Senate
President Senate State: OH
Calendar Year-To-Date
Per Election for Office Sought 300458.82
Disbursement For: Primary General
Other (specify)

Full Name of Payee
76 Words
Mailing Address 1806 Vernon St, NW #100
City Washington State DC Zip Code 20009
Purpose of Expenditure
Full payment of transaction B621103 originally reported on
2016 FEC M8 report. See Schedule D
Category/Type 004
Date of Public Distribution/Dissemination 07/27/2016
Amount 2050.00
Transaction ID : B621103
Date of Disbursement or Obligation 08/05/2016

Name of Federal Candidate:
Clinton, Hillary, ,
Support Oppose
Office Sought: House Senate
President Senate State: US
Calendar Year-To-Date
Per Election for Office Sought 372195.56
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 58551.13
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, ,

[Electronically Filed]

Date

03/17/2017

Signature

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

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00489799                 </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Pennsylvania Advocates</b> MEMO	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 09 / 2016						
Mailing Address 1514 North 2nd Street, Harrisburg,	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1562.50</div> Transaction ID : <b>B622008</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 09 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Harrisburg</td> <td>PA</td> <td>17102</td> </tr> </table>		City	State	Zip Code	Harrisburg	PA	17102
City		State	Zip Code				
Harrisburg	PA	17102					
Purpose of Expenditure Canvassing. See Schedule D							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>						
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">465945.56</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Pennsylvania Advocates</b> MEMO	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 09 / 2016						
Mailing Address 1514 North 2nd Street, Harrisburg,	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1562.50</div> Transaction ID : <b>B622009</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 09 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Harrisburg</td> <td>PA</td> <td>17102</td> </tr> </table>		City	State	Zip Code	Harrisburg	PA	17102
City		State	Zip Code				
Harrisburg	PA	17102					
Purpose of Expenditure Consultant: strategy and messaging. See Schedule D							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>						
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">465945.56</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Hubbard, Tshombe, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2017

Signature



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

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00489799                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float:right;"><input checked="" type="checkbox"/> Memo Item</span> <b>Planned Parenthood Pennsylvania Advocates</b> MEMO	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">08 / 09 / 2016</span>						
Mailing Address 1514 North 2nd Street, Harrisburg,	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1562.50</div> Transaction ID : <b>B622010</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">08 / 09 / 2016</span>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Harrisburg</td> <td>PA</td> <td>17102</td> </tr> </table>		City	State	Zip Code	Harrisburg	PA	17102
City		State	Zip Code				
Harrisburg	PA	17102					
Purpose of Expenditure Consultant: strategy and messaging. See Schedule D							
Name of Federal Candidate: <span style="float:right;"><input type="checkbox"/> Support</span> Trump, Donald, , , <span style="float:right;"><input checked="" type="checkbox"/> Oppose</span>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>						
Calendar Year-To-Date Per Election for Office Sought <span style="float:right;">360149.36</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <span style="float:right;"><input checked="" type="checkbox"/> Memo Item</span> <b>Planned Parenthood Pennsylvania Advocates</b> MEMO	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">08 / 09 / 2016</span>						
Mailing Address 1514 North 2nd Street, Harrisburg,	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1562.50</div> Transaction ID : <b>B622011</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">08 / 09 / 2016</span>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Harrisburg</td> <td>PA</td> <td>17102</td> </tr> </table>		City	State	Zip Code	Harrisburg	PA	17102
City		State	Zip Code				
Harrisburg	PA	17102					
Purpose of Expenditure Phone calls. See Schedule D							
Name of Federal Candidate: <span style="float:right;"><input type="checkbox"/> Support</span> Trump, Donald, , , <span style="float:right;"><input checked="" type="checkbox"/> Oppose</span>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>						
Calendar Year-To-Date Per Election for Office Sought <span style="float:right;">360149.36</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Hubbard, Tshombe, , ,*

**[Electronically Filed]**

Date

03 / 17 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee: Planned Parenthood Pennsylvania Advocates MEMO
Mailing Address: 1514 North 2nd Street, Harrisburg, PA 17102
Purpose of Expenditure: Canvassing. See Schedule D
Category/Type: 004
Date of Public Distribution/Dissemination: 08/09/2016
Amount: 1562.50
Transaction ID: B622012
Date of Disbursement or Obligation: 08/09/2016
Name of Federal Candidate: Trump, Donald, , , Oppose
Office Sought: President
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 360149.36

Full Name of Payee: Planned Parenthood Pennsylvania Advocates MEMO
Mailing Address: 1514 North 2nd Street, Harrisburg, PA 17102
Purpose of Expenditure: Events. See Schedule D
Category/Type: 004
Date of Public Distribution/Dissemination: 08/09/2016
Amount: 1562.50
Transaction ID: B622013
Date of Disbursement or Obligation: 08/09/2016
Name of Federal Candidate: Trump, Donald, , , Oppose
Office Sought: President
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 360149.36

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

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

03 / 17 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee
Community Outreach Group LLC
Mailing Address 1110 Vermont Ave N.W. #300
City Washington State DC Zip Code 20005
Purpose of Expenditure
Canvassing Category/Type 004
Date of Public Distribution/Dissemination 08/09/2016
Amount 87500.00
Transaction ID : B621994
Date of Disbursement or Obligation 08/26/2016

Name of Federal Candidate:
Trump, Donald, ,
Support Oppose
Office Sought:
President Senate State: US
Disbursement For:
Primary General 2016
Other (specify)

Full Name of Payee
Community Outreach Group LLC
Mailing Address 1110 Vermont Ave N.W. #300
City Washington State DC Zip Code 20005
Purpose of Expenditure
Canvassing Category/Type 004
Date of Public Distribution/Dissemination 08/09/2016
Amount 87500.00
Transaction ID : B621995
Date of Disbursement or Obligation 08/26/2016

Name of Federal Candidate:
Clinton, Hillary, ,
Support Oppose
Office Sought:
President Senate State: US
Disbursement For:
Primary General 2016
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 175000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, ,

[Electronically Filed]

Date

03/17/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee
Community Outreach Group LLC
Mailing Address 1110 Vermont Ave N.W. #300
City Washington State DC Zip Code 20005
Purpose of Expenditure
Canvassing Category/Type 004
Date of Public Distribution/Dissemination 08/09/2016
Amount 87500.00
Transaction ID: B621996
Date of Disbursement or Obligation 08/26/2016

Name of Federal Candidate:
Toomey, Pat, ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date
Per Election for Office Sought 365950.62
Disbursement For: Primary General 2016
Other (specify)

Full Name of Payee
Community Outreach Group LLC
Mailing Address 1110 Vermont Ave N.W. #300
City Washington State DC Zip Code 20005
Purpose of Expenditure
Canvassing Category/Type 004
Date of Public Distribution/Dissemination 08/09/2016
Amount 87500.00
Transaction ID: B621997
Date of Disbursement or Obligation 08/26/2016

Name of Federal Candidate:
McGinty, Katie, ,
Support Oppose
Office Sought: House District:
President Senate State: PA
Calendar Year-To-Date
Per Election for Office Sought 93750.00
Disbursement For: Primary General 2016
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 175000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, ,

[Electronically Filed]

Date

03/17/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee: Planned Parenthood Pennsylvania Advocates MEMO
Mailing Address: 1514 North 2nd Street, Harrisburg, PA 17102
Purpose of Expenditure: Events. See Schedule D
Category/Type: 004
Name of Federal Candidate: Toomey, Pat, , , Oppose
Office Sought: Senate
Amount: 1562.50
Transaction ID: B621998
Date of Disbursement or Obligation: 08/09/2016
Disbursement For: General 2016

Full Name of Payee: Planned Parenthood Pennsylvania Advocates MEMO
Mailing Address: 1514 North 2nd Street, Harrisburg, PA 17102
Purpose of Expenditure: Canvassing. See Schedule D
Category/Type: 004
Name of Federal Candidate: Toomey, Pat, , , Oppose
Office Sought: Senate
Amount: 1562.50
Transaction ID: B621999
Date of Disbursement or Obligation: 08/09/2016
Disbursement For: General 2016

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

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

03 / 17 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee: Planned Parenthood Pennsylvania Advocates MEMO
Mailing Address: 1514 North 2nd Street, Harrisburg, PA 17102
Purpose of Expenditure: Phone calls. See Schedule D
Category/Type: 004
Name of Federal Candidate: Toomey, Pat, , , Oppose
Office Sought: Senate
Disbursement For: General 2016
Amount: 1562.50
Transaction ID: B622000
Date of Disbursement or Obligation: 08/09/2016

Full Name of Payee: Planned Parenthood Pennsylvania Advocates MEMO
Mailing Address: 1514 North 2nd Street, Harrisburg, PA 17102
Purpose of Expenditure: Consultant: strategy and messaging. See Schedule D
Category/Type: 004
Name of Federal Candidate: Toomey, Pat, , , Oppose
Office Sought: Senate
Disbursement For: General 2016
Amount: 1562.50
Transaction ID: B622001
Date of Disbursement or Obligation: 08/09/2016

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

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

03 / 17 / 2017

Signature

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

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 2em; font-weight: bold; margin-right: 5px;">C</span> C00489799                 </div>
--	--

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Pennsylvania Advocates</b> MEMO		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 08 / 09 / 2016
Mailing Address 1514 North 2nd Street, Harrisburg,		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1562.50</div>
City Harrisburg	State PA Zip Code 17102	
Purpose of Expenditure Consultant: strategy and messaging. See Schedule D		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: McGinty, Katie, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: PA <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">93750.00</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Pennsylvania Advocates</b> MEMO		Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 08 / 09 / 2016
Mailing Address 1514 North 2nd Street, Harrisburg,		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1562.50</div>
City Harrisburg	State PA Zip Code 17102	
Purpose of Expenditure Phone calls. See Schedule D		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: McGinty, Katie, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: PA <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">93750.00</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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*Hubbard, Tshombe, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2017

Signature

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

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00489799                 </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Pennsylvania Advocates</b> MEMO		Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 09 / 2016
Mailing Address 1514 North 2nd Street, Harrisburg,		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                  1562.50             </div>
City Harrisburg	State PA Zip Code 17102	
Purpose of Expenditure Canvassing. See Schedule D		Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 09 / 2016
Name of Federal Candidate: McGinty, Katie, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: PA <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">93750.00</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Planned Parenthood Pennsylvania Advocates</b> MEMO		Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 09 / 2016
Mailing Address 1514 North 2nd Street, Harrisburg,		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                  1562.50             </div>
City Harrisburg	State PA Zip Code 17102	
Purpose of Expenditure Events. See Schedule D		Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 09 / 2016
Name of Federal Candidate: McGinty, Katie, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: PA <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">93750.00</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                  0.00             </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                  _____             </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                  _____             </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Hubbard, Tshombe, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2017

Signature



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

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

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

Full Name of Payee <b>Planned Parenthood Pennsylvania Advocates</b> MEMO	"> <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1514 North 2nd Street, Harrisburg,		Amount <input type="text"/>
City Harrisburg State PA Zip Code 17102		Transaction ID : <b>B622006</b>
Purpose of Expenditure Events. See Schedule D	Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Clinton, Hillary, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	465945.56	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Planned Parenthood Pennsylvania Advocates</b> MEMO	"> <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1514 North 2nd Street, Harrisburg,		Amount <input type="text"/>
City Harrisburg State PA Zip Code 17102		Transaction ID : <b>B622007</b>
Purpose of Expenditure Phone calls. See Schedule D	Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Clinton, Hillary, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	465945.56	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

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

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

/  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee Latino Decisions MEMO
Mailing Address 15 South Grady Way, Suite 620
City Seattle State WA Zip Code 98057
Purpose of Expenditure Polling. See Schedule D
Category/Type 004
Name of Federal Candidate: Trump, Donald, , , Support Oppose
Office Sought: President Senate State: US
Calendar Year-To-Date Per Election for Office Sought 373749.36
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Latino Decisions MEMO
Mailing Address 15 South Grady Way, Suite 620
City Seattle State WA Zip Code 98057
Purpose of Expenditure Polling. See Schedule D
Category/Type 004
Name of Federal Candidate: Clinton, Hillary, , , Support Oppose
Office Sought: President Senate State: US
Calendar Year-To-Date Per Election for Office Sought 479545.56
Disbursement For: Primary General 2016 Other (specify)

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

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

03 / 17 / 2017

Signature

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

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00489799                 </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>GMMB</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">Y Y Y Y Y Y</span>                      08 / 15 / 2016                 </div>
Mailing Address 3050 K Street, NW/Suite 300	Amount <div style="border: 1px solid black; padding: 2px;">                     1126022.00                 </div>
City Washington State DC Zip Code 20007	<b>Transaction ID : B622317</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">Y Y Y Y Y Y</span>                      08 / 11 / 2016                 </div>
Purpose of Expenditure Ad Buy and Commission Category/Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Toomey, Pat, , , Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: PA
Name of Federal Candidate: Toomey, Pat, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; float: right;">1491972.62</div>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">Y Y Y Y Y Y</span>                      07 / 14 / 2016                 </div>
Full Name of Payee <input type="checkbox"/> Memo Item <b>Drew &amp; Rogers, Inc.</b>	Amount <div style="border: 1px solid black; padding: 2px;">                     7819.54                 </div>
Mailing Address 30 Plymouth Street	<b>Transaction ID : B619964</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">Y Y Y Y Y Y</span>                      08 / 15 / 2016                 </div>
City Fairfield State NJ Zip Code 07004	Name of Federal Candidate: Trump, Donald, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure Payment of IE (B619964) reported on FEC M8 report. Small items & distribution. See Schedule D Category/Type 003	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US
Name of Federal Candidate: Trump, Donald, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; float: right;">381568.90</div>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">Y Y Y Y Y Y</span>                      07 / 14 / 2016                 </div>

Full Name of Payee <input type="checkbox"/> Memo Item <b>Drew &amp; Rogers, Inc.</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">Y Y Y Y Y Y</span>                      07 / 14 / 2016                 </div>
Mailing Address 30 Plymouth Street	Amount <div style="border: 1px solid black; padding: 2px;">                     7819.54                 </div>
City Fairfield State NJ Zip Code 07004	<b>Transaction ID : B619964</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">Y Y Y Y Y Y</span>                      08 / 15 / 2016                 </div>
Purpose of Expenditure Payment of IE (B619964) reported on FEC M8 report. Small items & distribution. See Schedule D Category/Type 003	Name of Federal Candidate: Trump, Donald, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate: Trump, Donald, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: US
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; float: right;">381568.90</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 150px; float: right;">1133841.54</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 150px; float: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 150px; float: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Hubbard, Tshombe, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 03 / 17 / 2017

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

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00489799                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>SKDKnickerbocker LLC</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 04 / 19 / 2016						
Mailing Address 1150 18th Street NW/Ste. 800	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">16794.22</div> Transaction ID : <b>B599463</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 08 / 16 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20036</td> </tr> </table>		City	State	Zip Code	Washington	DC	20036
City		State	Zip Code				
Washington	DC	20036					
Purpose of Expenditure Payment for IE (B599463) originally reported on 2016 FEC M5 Report. See Schedule D							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Ayotte, Kelly, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>NH</u> <input type="checkbox"/> President						
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">359969.22</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item <b>Community Outreach Group LLC</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 07 / 20 / 2016						
Mailing Address 1110 Vermont Ave N.W. #300	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10000.00</div> Transaction ID : <b>B620453</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 08 / 17 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005</td> </tr> </table>		City	State	Zip Code	Washington	DC	20005
City		State	Zip Code				
Washington	DC	20005					
Purpose of Expenditure Payment for IE (B620453) originally reported on 2016 FEC M8 Report. See Schedule D							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Heck, Joseph, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>NV</u> <input type="checkbox"/> President						
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">134329.05</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">26794.22</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Hubbard, Tshombe, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee: Community Outreach Group LLC
Mailing Address: 1110 Vermont Ave N.W. #300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Payment for IE (B620454) originally reported on 2016 FEC M8 Report. See Schedule D
Category/Type: 004
Date of Public Distribution/Dissemination: 07/20/2016
Amount: 10000.00
Transaction ID: B620454
Date of Disbursement or Obligation: 08/17/2016
Name of Federal Candidate: Trump, Donald, , , Support: [ ], Oppose: [x]
Office Sought: [x] President [ ] House [ ] Senate State: US
Calendar Year-To-Date Per Election for Office Sought: 391568.90
Disbursement For: [ ] Primary [x] General 2016 [ ] Other (specify)

Full Name of Payee: Terris Barnes & Walters
Mailing Address: 400 Montgomery St # 700
City: San Francisco State: CA Zip Code: 94104
Purpose of Expenditure: Canvass Lit; note correction to earlier estimate
Category/Type: 004
Date of Public Distribution/Dissemination: 08/19/2016
Amount: 1299.50
Transaction ID: B623462
Date of Disbursement or Obligation: 08/19/2016
Name of Federal Candidate: Trump, Donald, , , Support: [ ], Oppose: [x]
Office Sought: [x] President [ ] House [ ] Senate State: US
Calendar Year-To-Date Per Election for Office Sought: 393301.57
Disbursement For: [ ] Primary [x] General 2016 [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 11299.50
(a) SUBTOTAL of Unitemized Independent Expenditures .....
(a) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , ,

[Electronically Filed]

Date

03 / 17 / 2017

Signature

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

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00489799                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Bully Pulpit Interactive</b>	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 15 / 2016						
Mailing Address 1140 Connecticut Ave NW #800	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                      230000.00                 </div> Transaction ID : <b>B622318</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 24 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City</td> <td style="width:20%;">State</td> <td style="width:50%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20036</td> </tr> </table>		City	State	Zip Code	Washington	DC	20036
City		State	Zip Code				
Washington	DC	20036					
Purpose of Expenditure Digital Ad Buy							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Toomey, Pat, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: PA						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                      1789533.03                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item <b>Moxie Media Inc.</b>	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 19 / 2016						
Mailing Address 2021 Minor Ave. East	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                      5000.00                 </div> Transaction ID : <b>B623457</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 08 / 24 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City</td> <td style="width:20%;">State</td> <td style="width:50%;">Zip Code</td> </tr> <tr> <td>Seattle</td> <td>WA</td> <td>99102</td> </tr> </table>		City	State	Zip Code	Seattle	WA	99102
City		State	Zip Code				
Seattle	WA	99102					
Purpose of Expenditure Canvass Lit							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Portman, Rob, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: OH						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                      305458.82                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                      235000.00                 </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                      _____                 </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                      _____                 </div>

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Hubbard, Tshombe, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee Moxie Media Inc.
Mailing Address 2021 Minor Ave. East
City Seattle State WA Zip Code 99102
Purpose of Expenditure Canvass Lit Category/Type 004
Date of Public Distribution/Dissemination 08/19/2016
Amount 5000.00
Transaction ID : B623458
Date of Disbursement or Obligation 08/24/2016

Name of Federal Candidate: Strickland, Ted, ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Moxie Media Inc.
Mailing Address 2021 Minor Ave. East
City Seattle State WA Zip Code 99102
Purpose of Expenditure Canvass Lit Category/Type 004
Date of Public Distribution/Dissemination 08/19/2016
Amount 5000.00
Transaction ID : B623459
Date of Disbursement or Obligation 08/24/2016

Name of Federal Candidate: Trump, Donald, ,
Support Oppose
Office Sought: President Senate State: US
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 10000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, ,

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Date

03/17/2017

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee Moxie Media Inc.
Mailing Address 2021 Minor Ave. East
City Seattle State WA Zip Code 99102
Purpose of Expenditure Canvass Lit Category/Type 004
Name of Federal Candidate: Clinton, Hillary, , , Support
Office Sought: President State: US
Calendar Year-To-Date Per Election for Office Sought 485795.56
Disbursement For: General 2016

Full Name of Payee SKDKnickerbocker
Mailing Address 1150 18th St., NW #800
City Washington State DC Zip Code 20036
Purpose of Expenditure Full adjusted payment for IE (B619968) originally reported on 2016 FEC M8 Report See Schedule D
Category/Type 003
Name of Federal Candidate: / Pence, Trump, , , Oppose
Office Sought: President State: US
Calendar Year-To-Date Per Election for Office Sought 403301.57
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 10000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, , , [Electronically Filed]
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Date 03 / 17 / 2017



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

NAME OF COMMITTEE (In Full) <b>Planned Parenthood Votes</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00489799                 </div>
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Check if  24-hour report     48-hour report     New report    Amends report filed on   /  /  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Moxie Media Inc.</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">07</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">27</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">2016</span> </div>
Mailing Address 2021 Minor Ave. East	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">1250.00</span> </div>
City State Zip Code Seattle WA 99102	<b>Transaction ID : B621017</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">08</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">24</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">2016</span> </div>
Purpose of Expenditure Full payment for IE (B621017) originally reported on FEC M8 report. See Schedule D	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">485795.56</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>Moxie Media Inc.</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">07</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">27</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">2016</span> </div>
Mailing Address 2021 Minor Ave. East	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">1250.00</span> </div>
City State Zip Code Seattle WA 99102	<b>Transaction ID : B621018</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">08</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">24</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">2016</span> </div>
Purpose of Expenditure Full payment for IE (B621018) originally reported on FEC M8 report. See Schedule D	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Strickland, Ted, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">302244.82</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">2500.00</span> </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;"> </span> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;"> </span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Hubbard, Tshombe, , ,*

**[Electronically Filed]**

Date

  /  /    
03 / 17 / 2017

Signature

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

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

Full Name of Payee <input type="checkbox"/> Memo Item <b>Terris Barnes &amp; Walters</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 400 Montgomery St # 700	Amount <input type="text"/> 1299.50 <b>Transaction ID : B623461</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code San Francisco CA 94104	
Purpose of Expenditure Canvass Lit; note correction to earlier estimate	
Name of Federal Candidate: Clinton, Hillary, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 487528.22	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item <b>Terris Barnes &amp; Walters</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 400 Montgomery St # 700	Amount <input type="text"/> 1299.50 <b>Transaction ID : B623463</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code San Francisco CA 94104	
Purpose of Expenditure Canvass Lit; note correction to earlier estimate	
Name of Federal Candidate: McGinty, Katie, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 95482.67	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 2599.00
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Hubbard, Tshombe, , ,*

**[Electronically Filed]**

Date

/  /

Signature

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

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

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

Full Name of Payee <input type="checkbox"/> Memo Item <b>Terris Barnes &amp; Walters</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 400 Montgomery St # 700			Amount <input type="text"/>		
City San Francisco	State CA	Zip Code 94104	Transaction ID : <b>B623464</b>		
Purpose of Expenditure Canvass Lit; note correction to earlier estimate		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Toomey, Pat, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>PA</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item <b>76 Words</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 1806 Vernon St, NW #100			Amount <input type="text"/>		
City Washington	State DC	Zip Code 20009	Transaction ID : <b>B622316</b>		
Purpose of Expenditure Correct estimated pymnt of IE(B622316)rptd on 48 Hr IE report.Ad production, commission.See Sched.D		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Toomey, Pat, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>PA</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

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

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Hubbard, Tshombe, , ,*

**[Electronically Filed]**

Date

/  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee
The Pivot Group
Mailing Address
1720 I Street NW Suite 550
City
Washington State
DC Zip Code
20005
Purpose of Expenditure
Canvass Lit Category/
Type
004

Date of Public Distribution/Dissemination
08 / 24 / 2016
Amount
8128.00
Transaction ID : B623973
Date of Disbursement or Obligation
08 / 25 / 2016

Name of Federal Candidate:
Cortez-Masto, Catherine, ,
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
84231.03

Office Sought:
House
Senate
District:
State: NV
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
The Pivot Group
Mailing Address
1720 I Street NW Suite 550
City
Washington State
DC Zip Code
20005
Purpose of Expenditure
Canvass Lit Category/
Type
004

Date of Public Distribution/Dissemination
08 / 24 / 2016
Amount
2709.00
Transaction ID : B623974
Date of Disbursement or Obligation
08 / 25 / 2016

Name of Federal Candidate:
Heck, Joseph, ,
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
137038.42

Office Sought:
House
Senate
District:
State: NV
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
10837.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hubbard, Tshombe, ,

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Date

03 / 17 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee
Itzamna Translations Company
MEMO
Mailing Address P.O. Box 1015
City Glendale State AZ Zip Code 85311
Purpose of Expenditure Translation services. See Schedule D
Category/Type 004
Date of Public Distribution/Dissemination 08/26/2016
Amount 56.29
Transaction ID: B623979
Date of Disbursement or Obligation 08/26/2016

Name of Federal Candidate: Cortez-Masto, Catherine, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 84287.32

Full Name of Payee
Itzamna Translations Company
MEMO
Mailing Address P.O. Box 1015
City Glendale State AZ Zip Code 85311
Purpose of Expenditure Translation services. See Schedule D
Category/Type 004
Date of Public Distribution/Dissemination 08/26/2016
Amount 56.29
Transaction ID: B623980
Date of Disbursement or Obligation 08/26/2016

Name of Federal Candidate: Heck, Joseph, ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 137094.71

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

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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Date

03/17/2017

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Planned Parenthood Votes
FEC IDENTIFICATION NUMBER
C C00489799

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

Full Name of Payee
Florida Alliance of Planned Parenthood Affiliates
Mailing Address 122 S Calhoun St
City Tallahassee State FL Zip Code 32301
Purpose of Expenditure
In-kind: Communications Staff Time
Category/Type 007
Date of Public Distribution/Dissemination 08/05/2016
Amount 355.04
Transaction ID: B627029
Date of Disbursement or Obligation 08/05/2016
Name of Federal Candidate:
Future, For Our, , ,
Support Oppose
Office Sought: House District:
President Senate State: DC
Calendar Year-To-Date
Per Election for Office Sought 355.04
Disbursement For: Primary General
Other (specify) Not Applicable

Full Name of Payee
O'Brien Garrett (formerly known as OMP Inc.)
Mailing Address 1133 19th St. NW #300
City Washington State DC Zip Code 20036
Purpose of Expenditure
Printing of mail piece
Category/Type 001
Date of Public Distribution/Dissemination 06/22/2016
Amount 2373.29
Transaction ID: B617860
Date of Disbursement or Obligation 08/19/2016
Name of Federal Candidate:
Trump, Donald, , ,
Support Oppose
Office Sought: House District:
President Senate State: US
Calendar Year-To-Date
Per Election for Office Sought 25909.56
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2728.33
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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Date

03/17/2017

Signature

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

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

Full Name of Payee <input type="checkbox"/> Memo Item <b>O'Brien Garrett (formerly known as OMP Inc.)</b>	Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">06 / 22 / 2016</div>			
Mailing Address 1133 19th St. NW #300	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2373.29</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black; padding: 2px;">City Washington</td> <td style="width:17%; border-right: 1px solid black; padding: 2px;">State DC</td> <td style="padding: 2px;">Zip Code 20036</td> </tr> </table>		City Washington	State DC	Zip Code 20036
City Washington		State DC	Zip Code 20036	
Purpose of Expenditure Printing of mail piece				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Clinton, Hillary, , ,	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>US</u>			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">25909.56</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>			
Mailing Address	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black; padding: 2px;">City</td> <td style="width:17%; border-right: 1px solid black; padding: 2px;">State</td> <td style="padding: 2px;">Zip Code</td> </tr> </table>		City	State	Zip Code
City		State	Zip Code	
Purpose of Expenditure				
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2373.29</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2576567.26</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

\_\_\_\_\_  
 Signature
 

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

03 / 17 / 2017

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