

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation Planned Parenthood Action Fund Inc.			3. FEC Identification Number C C90005471
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 123 William St, 10th Floor			
(c) City, State and ZIP Code New York NY 10038			
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

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

b) Is this Report an amendment? No Yes, it amends the report filed on / /

5. COVERING PERIOD: FROM / / 04 / 01 / 2016
THROUGH / / 06 / 30 / 2016

6. TOTAL CONTRIBUTIONS..... 8590.32
7. TOTAL INDEPENDENT EXPENDITURES 81540.30

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Deirdre Schifeling	<i>Deirdre Schifeling</i>	07/15/2016

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

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

Form/Schedule: F5N

Transaction ID :

Independent expenditures disclosed on this report and listing 'DC' in the 'Office Sought - state' field were done on a nationwide basis and did not focus on any particular state or group of states.

Form/Schedule:

Transaction ID:

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

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 FILER (In Full)
Planned Parenthood Action Fund Inc.

A. Full Name (Last, First, Middle Initial) Emily's List			Date of Receipt MM / DD / YYYY 06 / 23 / 2016		
Mailing Address 1800 M St., NW/Ste. 375N			Transaction ID : 1280981		
City Washington	State DC	Zip Code 20036	Amount of Each Receipt this Period 8590.32		
FEC ID number of contributing federal political committee. C					
Name of Employer N/A			Occupation N/A		

B. Full Name (Last, First, Middle Initial)			Date of Receipt MM / DD / YYYY		
Mailing Address					
City	State	Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C					
Name of Employer			Occupation		

C. Full Name (Last, First, Middle Initial)			Date of Receipt MM / DD / YYYY		
Mailing Address					
City	State	Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C					
Name of Employer			Occupation		

D. Full Name (Last, First, Middle Initial)			Date of Receipt MM / DD / YYYY		
Mailing Address					
City	State	Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C					
Name of Employer			Occupation		

SUBTOTAL of Receipts This Page (optional)	8590.32
TOTAL This Period (last page carry total to Line 6)	8590.32

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee M+R Strategic Services		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 04 / 2016	
Mailing Address 1904 L St. NW #800		Amount 129.96	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure E-mail copywriting		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 152262.27		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Democratic Primary	

Full Name (Last, First, Middle Initial) of Payee Rising Tide Interactive		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 05 / 2016	
Mailing Address 901 New York Ave NW #470 East		Amount 3984.04	
City Washington	State DC	Zip Code 20001	
Purpose of Expenditure Online advertising-Estimated costs		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 16631.70		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

Full Name (Last, First, Middle Initial) of Payee Rising Tide Interactive		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 05 / 2016	
Mailing Address 901 New York Ave NW #470 East		Amount 2988.03	
City Washington	State DC	Zip Code 20001	
Purpose of Expenditure Online advertising-Estimated costs		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Cruz		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 16631.70		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

(a) SUBTOTAL of Itemized Independent Expenditures.....	7102.03
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Rising Tide Interactive		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 05 / 2016	
Mailing Address 901 New York Ave NW #470 East		Amount 2988.03	
City Washington	State DC	Zip Code 20001	Transaction ID : 57598449
Purpose of Expenditure Online advertising-Estimated costs	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John Kasich		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 16631.70		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

Full Name (Last, First, Middle Initial) of Payee M+R Strategic Services		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 07 / 2016	
Mailing Address 1904 L St. NW #800		Amount 42.14	
City Washington	State DC	Zip Code 20036	Transaction ID : 57600471
Purpose of Expenditure E-mail copywriting/estimated costs	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27893.76		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

Full Name (Last, First, Middle Initial) of Payee M+R Strategic Services		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 07 / 2016	
Mailing Address 1904 L St. NW #800		Amount 337.12	
City Washington	State DC	Zip Code 20036	Transaction ID : 57600473
Purpose of Expenditure E-mail copywriting/estimated costs	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Cruz		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27893.76		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

(a) SUBTOTAL of Itemized Independent Expenditures.....	3367.29
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee M+R Strategic Services		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 07 / 2016	
Mailing Address 1904 L St. NW #800		Amount 42.14	
City Washington	State DC	Zip Code 20036	Transaction ID : 57600475
Purpose of Expenditure E-mail copywriting/estimated costs	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John Kasich		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27893.76		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

Full Name (Last, First, Middle Initial) of Payee OMP Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2016	
Mailing Address 1133 19th St. NW #300		Amount 7900.38	
City Washington	State DC	Zip Code 20036	Transaction ID : 57600477
Purpose of Expenditure Mail/estimated costs	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27893.76		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

Full Name (Last, First, Middle Initial) of Payee OMP Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2016	
Mailing Address 1133 19th St. NW #300		Amount 3950.19	
City Washington	State DC	Zip Code 20036	Transaction ID : 57600479
Purpose of Expenditure Mail/estimated costs	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Cruz		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27893.76		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

(a) SUBTOTAL of Itemized Independent Expenditures.....	11892.71
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee OMP Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2016	
Mailing Address 1133 19th St. NW #300		Amount 3950.19	
City Washington	State DC	Zip Code 20036	Transaction ID : 57600480
Purpose of Expenditure Mail/estimated costs	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John Kasich		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27893.76		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

Full Name (Last, First, Middle Initial) of Payee M&R Strategic Services		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 03 / 2016	
Mailing Address 1904 L Street NW #800		Amount 158.03	
City Washington	State DC	Zip Code 20036	Transaction ID : 57600587
Purpose of Expenditure Web copywriting - estimated cost	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 28947.27		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

Full Name (Last, First, Middle Initial) of Payee M&R Strategic Services		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 03 / 2016	
Mailing Address 1904 L Street NW #800		Amount 316.05	
City Washington	State DC	Zip Code 20036	Transaction ID : 57600588
Purpose of Expenditure Web copywriting - estimated cost	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Cruz		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 28947.27		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

(a) SUBTOTAL of Itemized Independent Expenditures.....	4424.27
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee M&R Strategic Services		Date of Public Distribution/Dissemination 05 / 03 / 2016	
Mailing Address 1904 L Street NW #800		Amount 158.03	
City Washington	State DC	Zip Code 20036	Transaction ID : 57600589
Purpose of Expenditure Web copywriting - estimated cost	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John Kasich		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 28947.27		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

Full Name (Last, First, Middle Initial) of Payee M&R Strategic Services		Date of Public Distribution/Dissemination 05 / 03 / 2016	
Mailing Address 1904 L Street NW #800		Amount 235.98	
City Washington	State DC	Zip Code 20036	Transaction ID : 57600590
Purpose of Expenditure Email copywriting - estimated cost	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 28947.27		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

Full Name (Last, First, Middle Initial) of Payee M&R Strategic Services		Date of Public Distribution/Dissemination 05 / 03 / 2016	
Mailing Address 1904 L Street NW #800		Amount 92.71	
City Washington	State DC	Zip Code 20036	Transaction ID : 57600591
Purpose of Expenditure Email copywriting - estimated cost	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Cruz		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 28947.27		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Republican Primary	

(a) SUBTOTAL of Itemized Independent Expenditures.....	486.72
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee M&R Strategic Services		Date of Public Distribution/Dissemination 05 / 03 / 2016	
Mailing Address 1904 L Street NW #800		Amount 92.71	
City Washington	State DC	Zip Code 20036	Transaction ID : 57600592
Purpose of Expenditure Email copywriting - estimated cost	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John Kasich		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 28947.27		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input checked="" type="checkbox"/> Republican Primary	

Full Name (Last, First, Middle Initial) of Payee Show Nets - Custom Internet Solutions		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1000 Fort Dusquesne Boulevard		Amount 674.10	
City Pittsburgh	State PA	Zip Code 15222	Transaction ID : 57601573
Purpose of Expenditure Phone Bill-Phone Bank, Estimate	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee David L. Lawrence Convention Center		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1000 Fort Dusquesne Boulevard		Amount 345.00	
City Pittsburgh	State PA	Zip Code 15222	Transaction ID : 57601574
Purpose of Expenditure Room Rental-Phone Bank, Estimate	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1111.81
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee CVS		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 429 Smithfield Street		Amount 87.50	
City Pittsburgh	State PA	Zip Code 15222	Transaction ID : 57601575
Purpose of Expenditure Transportation-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Voter Activation Network		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 48 Grove Street, Suite 202		Amount 353.32	
City Somerville	State MA	Zip Code 02144	Transaction ID : 57601575
Purpose of Expenditure Phone Bill-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Show Nets - Custom Internet Solutions		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1000 Fort Dusquesne Boulevard		Amount 674.10	
City Pittsburgh	State PA	Zip Code 15222	Transaction ID : 57601577
Purpose of Expenditure Phone Bill-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1114.92
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee David L. Lawrence Convention Center		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1000 Fort Dusquesne Boulevard		Amount 345.00	
City Pittsburgh	State PA	Zip Code 15222	Transaction ID : 57601578
Purpose of Expenditure Room Rental-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Advocates-The Political Arm of PPH of St. Louis		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 4251 Forest Park Avenue		Amount 9.00	
City St. Louis	State MO	Zip Code 63108	Transaction ID : 57601578
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of IN and KY, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 200 S. Meridian Street, Suite 400		Amount 1.00	
City Indianapolis	State IN	Zip Code 46225	Transaction ID : 57601580
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	355.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Wisconsin		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 302 N Jackson Street		Amount 4.00	
City Milwaukee	State WI	Zip Code 53202	Transaction ID : 57601581
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Michigan		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address PO Box 15041		Amount 4.00	
City Lansing	State MI	Zip Code 48901	Transaction ID : 57601582
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tennessee Advocates for Planned Parenthood		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 50 Vantage Way, Suite #102		Amount 9.00	
City Nashville	State TN	Zip Code 37228	Transaction ID : 57601583
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	17.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Florida Alliance of Planned Parenthood Affiliates		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 736 Central Avenue		Amount 4.00	
City Sarasota	State FL	Zip Code 34236	Transaction ID : 57601584
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Florida Alliance of Planned Parenthood Affiliates		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 736 Central Ave.		Amount 4.00	
City Sarasota	State FL	Zip Code 34236	Transaction ID : 57601661
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee PPAFof Santa Barbara, Ventura & San Luis Obispo		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1075 Camino del Rio South		Amount 88.00	
City Santa Barbara	State CA	Zip Code 93101	Transaction ID : 57601662
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	96.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates Mar Monte		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1691 The Alameda		Amount 11.00	
City San Jose	State CA	Zip Code 95126	
Purpose of Expenditure Travel-Canvas, Estimate		Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes Northwest and Hawaii		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 2001 East Madison		Amount 371.00	
City Seattle	State WA	Zip Code 98122	
Purpose of Expenditure Travel-Phone Bank, Estimate		Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tennessee Advocates for Planned Parenthood		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 50 Vantage Way Suite 102		Amount 9.00	
City Nashville	State TN	Zip Code 37228	
Purpose of Expenditure Travel-Canvas, Estimate		Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	391.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes Colorado		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 7155 E. 38th Ave.		Amount 12.00	
City Denver	State CO	Zip Code 80207	Transaction ID : 57601666
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes New Mexico		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 7155 E. 38th Ave.		Amount 10.00	
City Denver	State CO	Zip Code 80207	Transaction ID : 57601667
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Texas Votes		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 201 E. Ben White Blvd. Bld B, Ste		Amount 10.00	
City Austin	State TX	Zip Code 78704	Transaction ID : 57601668
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Oregon		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address PO Box 12267		Amount 275.00	
City Portland	State OR	Zip Code 97212	Transaction ID : 57601669
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Northern California Action Fund		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 2185 Pacheco St.		Amount 1.00	
City Concord	State CA	Zip Code 94520	Transaction ID : 57601670
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee CAF-PP Orange & San Bernardino Counties		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 700 S. Tustin St.		Amount 1.00	
City Orange	State CA	Zip Code 92866	Transaction ID : 57601671
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	277.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Action Fund of the Pacific SW		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 1075 Camino del Rio South		Amount 3.00	
City San Diego	State CA	Zip Code 92108	Transaction ID : 57601672
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Michigan		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address PO Box 15041		Amount 4.00	
City Lansing	State MI	Zip Code 48901	Transaction ID : 57601673
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Action Fund of the Pacific SW		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 1075 Camino del Rio South		Amount 55.00	
City San Diego	State CA	Zip Code 92108	Transaction ID : 57601674
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	62.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood New Hampshire Action Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 128 Lakeside Ave, Suite 301		Amount 165.00	
City Burlington	State VT	Zip Code 05401	Transaction ID : 57601675
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee PPAF of Santa Barbara, Ventura & San Luis Obispo		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 518 Garden St.		Amount 4.00	
City Santa Barbara	State CA	Zip Code 93101	Transaction ID : 57601676
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee PPAF of Santa Barbra, Ventura & San Louis Obispo		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 518 Garden Street		Amount 88.00	
City Santa Barbara	State CA	Zip Code 93101	Transaction ID : 57601677
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	257.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee PP Advocacy Fund of Massachusetts, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1055 Commonwealth Ave		Amount 33.00	
City Boston	State MA	Zip Code 02215	Transaction ID : 57601678
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes Northwest and Hawaii		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 2001 East Madison		Amount 371.00	
City Seattle	State WA	Zip Code 98122	Transaction ID : 57601678
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes Northwest and Hawaii		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 2001 East Madison		Amount 18.00	
City Seattle	State WA	Zip Code 98122	Transaction ID : 57601680
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	422.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Oregon		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address PO Box 12267		Amount 14.00	
City Portland	State OR	Zip Code 97212	Transaction ID : 57601681
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Virginia		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address P.O. Box 7281		Amount 4.00	
City Richmond	State VA	Zip Code 23221	Transaction ID : 57601585
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes South Atlantic		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 100 S Boylan Ave		Amount 21.00	
City Chapel Hill	State NC	Zip Code 27603	Transaction ID : 57601586
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Action Fund of New Jersey		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1150 Dickinson Street		Amount 2.00	
City Elizabeth	State NJ	Zip Code 07201	Transaction ID : 57601587
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Hudson Peconic Action Fund, Inc		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 4 Skyline Drive		Amount 7.00	
City Hawthorne	State NY	Zip Code 10532	Transaction ID : 57601588
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee PP Advocacy Fund of Massachusetts, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1055 Commonwealth Ave		Amount 2.00	
City Boston	State MA	Zip Code 02215	Transaction ID : 57601589
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	11.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood New Hampshire Action Fund		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 128 Lakeside Ave, Suite 301		Amount 8.00	
City Burlington	State VT	Zip Code 05401	Transaction ID : 57601590
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Michigan		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address PO Box 15041		Amount 82.00	
City Lansing	State MI	Zip Code 48901	Transaction ID : 57601591
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Wisconsin		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 302 N Jackson Street		Amount 82.00	
City Milwaukee	State WI	Zip Code 53202	Transaction ID : 57601592
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	172.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of IN and KY, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 200 S. Meridian Street, Suite 400		Amount 27.00	
City Indianapolis	State IN	Zip Code 46225	
Purpose of Expenditure Travel-Phone Bank, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601593

Full Name (Last, First, Middle Initial) of Payee Advocates-The Political Arm of PPH of St. Louis		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 4251 Forest Park Avenue		Amount 180.00	
City St. Louis	State MO	Zip Code 63108	
Purpose of Expenditure Travel-Phone Bank, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601593

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood of MN, ND, SD Action Fund Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 671 Vandalia St.		Amount 228.00	
City St. Paul	State MN	Zip Code 55114	
Purpose of Expenditure Travel-Phone Bank, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601596

(a) SUBTOTAL of Itemized Independent Expenditures.....	435.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Voters of Arkansas		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1171 7th Street		Amount 39.00	
City Des Moines	State IA	Zip Code 50314	
Purpose of Expenditure Travel-Phone Bank, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601598

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Voters of Nebraska		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1171 7th Street		Amount 80.00	
City Des Moines	State IA	Zip Code 50314	
Purpose of Expenditure Travel-Phone Bank, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601599

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Voters of Iowa		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1171 7th Street		Amount 71.00	
City Des Moines	State IA	Zip Code 50314	
Purpose of Expenditure Travel-Phone Bank, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601600

(a) SUBTOTAL of Itemized Independent Expenditures.....	190.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes Colorado		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 7155 E 38th Ave		Amount 69.00	
City Denver	State CO	Zip Code 80207	
Purpose of Expenditure Travel-Phone Bank, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601601

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Action Council of Utah, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 654 South 900 East		Amount 191.00	
City Salt Lake City	State UT	Zip Code 84102	
Purpose of Expenditure Travel-Phone Bank, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601603

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates Mar Monte		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 654 South 900 East		Amount 220.00	
City San Jose	State CA	Zip Code 95126	
Purpose of Expenditure Travel-Phone Bank, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601605

(a) SUBTOTAL of Itemized Independent Expenditures.....	480.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Hudson Peconic Action Fund, Inc		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 4 Skyline Drive		Amount 137.00	
City Hawthorne	State NY	Zip Code 10532	Transaction ID : 57601610
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Voters of Nebraska		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1171 7th Street		Amount 80.00	
City Des Moines	State IA	Zip Code 50314	Transaction ID : 57601613
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Action Fund of New Jersey		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1150 Dickinson Street		Amount 41.00	
City Elizabeth	State NJ	Zip Code 07201	Transaction ID : 57601616
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	258.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Oregon		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address PO Box 12267		Amount 275.00	
City Portland	State OR	Zip Code 97212	Transaction ID : 57601682
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood New Hampshire Action Fund		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 128 Lakeside Ave, Suite 301		Amount 8.00	
City Burlington	State VT	Zip Code 05401	Transaction ID : 57601682
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee PP Advocacy Fund of Massachusetts, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1055 Commonwealth Ave		Amount 2.00	
City Boston	State MA	Zip Code 02215	Transaction ID : 57601682
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Hudson Peconic Action Fund, Inc		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 4 Skyline Drive		Amount 7.00	
City Hawthorne	State NY	Zip Code 10532	Transaction ID : 57601685
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Action Fund of New Jersey		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1150 Dickinson Street		Amount 2.00	
City Elizabeth	State NJ	Zip Code 07201	Transaction ID : 57601686
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes South Atlantic		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 100 S Boylan Ave.		Amount 21.00	
City Chapel Hill	State NC	Zip Code 27603	Transaction ID : 57601687
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	30.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Virginia		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address PO Box 7281		Amount 4.00	
City Richmond	State VA	Zip Code 23221	Transaction ID : 57601688
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Wisconsin		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 302 N. Jackson St.		Amount 4.00	
City Milwaukee	State WI	Zip Code 53202	Transaction ID : 57601690
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of IN and KY, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 200 S. Meridian St. Suite 400		Amount 1.00	
City Indianapolis	State IN	Zip Code 46225	Transaction ID : 57601691
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Advocates-The Political Arm of PPH of St. Louis		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 4251 Forest Park Ave.		Amount 9.00	
City St. Louis	State MO	Zip Code 63108	
Purpose of Expenditure Travel-Canvas, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601693

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood of MN, ND, SD Action Fund Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 671 Vandalia St.		Amount 11.00	
City St. Paul	State MN	Zip Code 55114	
Purpose of Expenditure Travel-Canvas, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601694

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Voters of Arkansas		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1171 7th Street		Amount 2.00	
City Des Moines	State IA	Zip Code 50314	
Purpose of Expenditure Travel-Canvas, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601697

(a) SUBTOTAL of Itemized Independent Expenditures.....	22.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Voters of Nebraska		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1171 7th Street		Amount 4.00	
City Des Moines	State IA	Zip Code 50314	Transaction ID : 57601699
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Voters of Iowa		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1171 7th Street		Amount 4.00	
City Des Moines	State IA	Zip Code 50314	Transaction ID : 57601702
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes Colorado		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 7155 E. 38th St.		Amount 3.00	
City Denver	State CO	Zip Code 80207	Transaction ID : 57601707
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	11.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Action Council of Utah Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 654 South 900 East		Amount 9.00	
City Salt Lake City	State UT	Zip Code 84102	Transaction ID : 57601709
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Northern California Action Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 2185 Pacheco St.		Amount 21.00	
City Concord	State CA	Zip Code 94520	Transaction ID : 57601730
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee CAF- PP Orange & San Bernardino Counties		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 700 S. Tustin St.		Amount 21.00	
City Orange	State CA	Zip Code 92866	Transaction ID : 57601731
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	51.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Voters of Arkansas		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1171 7th St.		Amount 39.00	
City Des Moines	State IA	Zip Code 50314	Transaction ID : 57601732
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood New Hampshire Action Fund		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 128 Lakeside Ave., Suite 301		Amount 165.00	
City Burlington	State VT	Zip Code 05401	Transaction ID : 57601513
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee PP Advocacy Fund of Massachusetts, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1055 Commonwealth Ave.		Amount 33.00	
City Boston	State MA	Zip Code 02215	Transaction ID : 57601519
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	237.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Hudson Peconic Action Fund, Inc		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 4 Syline Drive		Amount 137.00	
City Hawthorne	State NY	Zip Code 10532	Transaction ID : 57601520
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Action Fund of New Jersey		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1150 Dickinson Street		Amount 41.00	
City Elizabeth	State NJ	Zip Code 07201	Transaction ID : 57601521
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes South Atlantic		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 100 Boylan Ave.		Amount 431.00	
City Chapel Hill	State NC	Zip Code 27603	Transaction ID : 57601522
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	609.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Virginia		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address PO Box 7281		Amount 72.00	
City Richmond	State VA	Zip Code 23221	Transaction ID : 57601523
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Florida Alliance of Planned Parenthood Affiliates		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 736 Central Avenue		Amount 91.00	
City Sarasota	State FL	Zip Code 34236	Transaction ID : 57601524
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tennessee Advocates for Planned Parenthood		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 50 Vantage Way, Ste 102		Amount 183.00	
City Nashville	State TN	Zip Code 37228	Transaction ID : 57601525
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	346.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood of MN, ND, SD Action Fund, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 671 Vandalia St.		Amount 11.00	
City St. Paul	State MN	Zip Code 55114	
Purpose of Expenditure Travel-Canvas, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601528

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Voters of Arkansas		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1171 7th Street.		Amount 2.00	
City Des Moines	State IA	Zip Code 50314	
Purpose of Expenditure Travel-Canvas, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601529

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Voters of Nebraska		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1171 7th Street.		Amount 4.00	
City Des Moines	State IA	Zip Code 50314	
Purpose of Expenditure Travel-Canvas, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601530

(a) SUBTOTAL of Itemized Independent Expenditures.....	17.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Voters of Iowa		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1171 7th Street.		Amount 4.00	
City Des Moines	State IA	Zip Code 50314	Transaction ID : 57601531
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes Colorado		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 7155 E 38th Ave		Amount 3.00	
City Denver	State CO	Zip Code 80207	Transaction ID : 57601532
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Action Council of Utah, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 654 South 900 East		Amount 9.00	
City Salt Lake	State UT	Zip Code 84102	Transaction ID : 57601535
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes Colorado		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 7155 E 38th Ave		Amount 12.00	
City Denver	State CO	Zip Code 80207	Transaction ID : 57601536
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates Mar Monte		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1691 The Alameda		Amount 11.00	
City San Jose	State CA	Zip Code 95126	Transaction ID : 57601537
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes New Mexico		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 7155 E 38th Ave		Amount 10.00	
City Denver	State CO	Zip Code 80207	Transaction ID : 57601538
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Texas Votes		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 201 E. Ben White Blvd, Bldg B, Sui		Amount 10.00	
City Austin	State TX	Zip Code 78704	Transaction ID : 57601539
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Northern California Action Fund		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 2185 Pacheco Street		Amount 1.00	
City Concord	State CA	Zip Code 94520	Transaction ID : 57601540
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee CAF- PP Orange & San Bernardino Counties		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 700 S. Tustin Street		Amount 1.00	
City Orange	State CA	Zip Code 92866	Transaction ID : 57601541
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Action Fund of the Pacific SW		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1075 Camino del Rio South		Amount 3.00	
City San Diego	State CA	Zip Code 92108	Transaction ID : 57601542
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Voters of Iowa		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1171 7th Street		Amount 71.00	
City Des Moines	State IA	Zip Code 50314	Transaction ID : 57601624
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes South Atlantic		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 100 S Boylan Ave		Amount 431.00	
City Chapel Hill	State NC	Zip Code 27603	Transaction ID : 57601625
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	505.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Virginia		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address PO Box 7281		Amount 72.00	
City Richmond	State VA	Zip Code 23221	Transaction ID : 57601629
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes Colorado		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 7155 E 38th Ave		Amount 69.00	
City Denver	State CO	Zip Code 80207	Transaction ID : 57601630
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes Colorado		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 7155 E 38th Ave		Amount 247.00	
City Denver	State CO	Zip Code 80207	Transaction ID : 57601631
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	388.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Florida Alliance of Planned Parenthood Affiliates		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 736 Central Avenue		Amount 91.00	
City Sarasota	State FL	Zip Code 34236	Transaction ID : 57601632
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Action Council of Utah, Inc		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 654 South 900 East		Amount 191.00	
City Salt Lake City	State UT	Zip Code 84102	Transaction ID : 57601634
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tennessee Advocates for Planned Parenthood		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 50 Vantage Way, Suite #102		Amount 183.00	
City Nashville	State TN	Zip Code 37228	Transaction ID : 57601635
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	465.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes New Mexico		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 7155 E 38th Ave		Amount 194.00	
City Denver	State CO	Zip Code 80207	Transaction ID : 57601637
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Michigan		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address PO Box 15041		Amount 82.00	
City Lansing	State MI	Zip Code 48901	Transaction ID : 57601638
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates Mar Monte		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1691 The Alameda		Amount 220.00	
City San Jose	State CA	Zip Code 95126	Transaction ID : 57601639
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	496.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Wisconsin		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 302 N Jackson Street		Amount 82.00	
City Milwaukee	State WI	Zip Code 53202	Transaction ID : 57601641
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Texas Votes		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 201 E. Ben White Blvd, Bldg B, Sui		Amount 206.00	
City Austin	State TX	Zip Code 78704	Transaction ID : 57601642
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of IN and KY, Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 200 S. Meridian Street, Suite 400		Amount 27.00	
City Indianapolis	State IN	Zip Code 46225	Transaction ID : 57601643
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	315.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes Colorado		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 7155 E 38th Ave		Amount 247.00	
City Denver	State CO	Zip Code 80207	Transaction ID : 57601644
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes New Mexico		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 7155 E 38th Ave		Amount 194.00	
City Denver	State CO	Zip Code 80207	Transaction ID : 57601645
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Advocates-The Political Arm of PPH of St. Louis		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 4251 Forest Park Avenue		Amount 180.00	
City St. Louis	State MO	Zip Code 63108	Transaction ID : 57601647
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	621.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Texas Votes		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 201 E Ben White Blvd, Bldg B, Ste		Amount 206.00	
City Austin	State TX	Zip Code 78704	Transaction ID : 57601648
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Northern California Action Fund		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 2185 Pacheco Street		Amount 21.00	
City Concord	State CA	Zip Code 94520	Transaction ID : 57601648
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood of MN, ND, SD Action Fund Inc.		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 671 Vandalia St.		Amount 228.00	
City St. Paul	State MN	Zip Code 55114	Transaction ID : 57601652
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	455.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee CAF- PP Orange & San Bernardino Counties		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 700 S. Tustin Street		Amount 21.00	
City Orange	State CA	Zip Code 92866	Transaction ID : 57601655
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Action Fund of the Pacific SW		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 1075 Camino del Rio South		Amount 55.00	
City San Diego	State CA	Zip Code 92108	Transaction ID : 57601658
Purpose of Expenditure Travel-Phone Bank, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee PPAF of Santa Barbara, Ventura, & San Luis Obispo		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 518 Garden Street		Amount 4.00	
City Santa Barbara	State CA	Zip Code 93101	Transaction ID : 57601543
Purpose of Expenditure Travel-Canvas, Estimate	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	80.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Votes Northwest and Hawaii		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 2001 East Madison		Amount 18.00	
City Seattle	State WA	Zip Code 98122	Transaction ID : 57601544
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Advocates of Oregon		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address PO Box 12267		Amount 14.00	
City Portland	State OR	Zip Code 97212	Transaction ID : 57601545
Purpose of Expenditure Travel-Canvas, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Fed-Ex Office Print & Ship Center		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 210 Grant Street		Amount 7.81	
City Pittsburgh	State PA	Zip Code 15219	Transaction ID : 57601567
Purpose of Expenditure Printing-Canvas, Estimate	Category/Type 007	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	39.81
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Fed-Ex Office Print & Ship Center		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 210 Grant Street		Amount 40.12	
City Pittsburgh	State PA	Zip Code 15219	
Purpose of Expenditure Printing-Phone Bank, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601568

Full Name (Last, First, Middle Initial) of Payee Fed-Ex Office Print & Ship Center		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 210 Grant Street		Amount 7.81	
City Pittsburgh	State PA	Zip Code 15219	
Purpose of Expenditure Printing-Canvas, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601569

Full Name (Last, First, Middle Initial) of Payee Fed-Ex Office Print & Ship Center		Date of Public Distribution/Dissemination 05 / 14 / 2016	
Mailing Address 210 Grant Street		Amount 40.12	
City Pittsburgh	State PA	Zip Code 15219	
Purpose of Expenditure Printing-Phone Bank, Estimate		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Katie McGinty		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57601570

(a) SUBTOTAL of Itemized Independent Expenditures.....	88.05
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee CVS		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 429 Smithfield Street		Amount 87.50	
City Pittsburgh	State PA	Zip Code 15222	Transaction ID : 57601571
Purpose of Expenditure Transportation-Canvas, Estimate	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Voter Activation Network		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 14 / 2016	
Mailing Address 48 Grove Street, Suite 202		Amount 353.32	
City Somerville	State MA	Zip Code 02144	Transaction ID : 57601572
Purpose of Expenditure Phone Bill-Phone Bank, Estimate	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11199.70		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee M+R Strategic Services		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 04 / 2016	
Mailing Address 1901 L Street, NW #800		Amount 421.40	
City Washington	State DC	Zip Code 20036	Transaction ID : 57618080
Purpose of Expenditure E-mail Copywriting	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14794.90		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	862.22
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee M+R Strategic Services		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 08 / 2016	
Mailing Address 1901 L Street, NW #800		Amount 210.70	
City Washington	State DC	Zip Code 20036	Transaction ID : 57618081
Purpose of Expenditure E-mail Copywriting	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14794.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee M+R Strategic Services		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 08 / 2016	
Mailing Address 1901 L Street, NW #800		Amount 210.70	
City Washington	State DC	Zip Code 20036	Transaction ID : 57618082
Purpose of Expenditure E-mail Copywriting	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14794.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rising Tide		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 16 / 2016	
Mailing Address 1250 H Street NW		Amount 6660.00	
City Washington	State DC	Zip Code 20005	Transaction ID : 57618083
Purpose of Expenditure Digital Ad	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14794.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	7081.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee M+R Strategic Services		Date of Public Distribution/Dissemination 06 / 23 / 2016	
Mailing Address 1901 L Street, NW #800		Amount 632.10	
City Washington	State DC	Zip Code 20036	Transaction ID : 57618085
Purpose of Expenditure E-mail Copywriting	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14794.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rising Tide		Date of Public Distribution/Dissemination 06 / 25 / 2016	
Mailing Address 1250 H Street NW		Amount 6660.00	
City Washington	State DC	Zip Code 20005	Transaction ID : 57618084
Purpose of Expenditure Digital Ad	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14794.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee M+R Strategic Services		Date of Public Distribution/Dissemination 06 / 27 / 2016	
Mailing Address 1901 L Street, NW #800		Amount 63.21	
City Washington	State DC	Zip Code 20036	Transaction ID : 57618479
Purpose of Expenditure E-mail Copywriting	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31645.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	7355.31
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee M+R Strategic Services		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 27 / 2016	
Mailing Address 1901 L Street, NW #800		Amount 37.93	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure E-mail Copywriting		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31645.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57618482

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Federation of America Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 27 / 2016	
Mailing Address 123 William Street, 10th Fl.		Amount 394.53	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure List rental		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31645.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57618483

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Federation of America Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 27 / 2016	
Mailing Address 123 William Street, 10th Floor		Amount 236.72	
City New York	State NY	Zip Code 10038	
Purpose of Expenditure List rental		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31645.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : 57618485

(a) SUBTOTAL of Itemized Independent Expenditures.....	669.18
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee API Source		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 27 / 2016	
Mailing Address 4471 Nicole Drive		Amount 16052.00	
City Lanham	State MD	Zip Code 20706	Transaction ID : 57618502
Purpose of Expenditure Apparel	Category/ Type 006	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31645.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee API Source		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 27 / 2016	
Mailing Address 4471 Nicole Drive		Amount 66.00	
City Lanham	State MD	Zip Code 20706	Transaction ID : 57618503
Purpose of Expenditure Estimated Shipping costs for Apparel	Category/ Type 003	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31645.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Stones' Phones		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 30 / 2016	
Mailing Address 41-750 Rancho Las Palmas Dr #E-3		Amount 1280.49	
City Rancho Mirage	State CA	Zip Code 92270	Transaction ID : 57619421
Purpose of Expenditure Teleconferencing Services	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 34384.55		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	17398.49
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Stones' Phones		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 30 / 2016	
Mailing Address 41-750 Rancho Las Palmas Dr #E-3		Amount 1280.49	
City Rancho Mirage	State CA	Zip Code 92270	Transaction ID : 57619422
Purpose of Expenditure Teleconferencing Services	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 34384.55		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee M+R Strategic Services		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 30 / 2016	
Mailing Address 1901 L Street, NW #800		Amount 178.28	
City Washington	State DC	Zip Code 20036	Transaction ID : 57619423
Purpose of Expenditure E-mail Copywriting	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: DC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 34384.55		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Emily's List		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 23 / 2016	
Mailing Address 1800 M St., NW/Ste. 375N		Amount 8590.32	
City Washington	State DC	Zip Code 20036	Transaction ID : 57619831
Purpose of Expenditure Ad Production: In-Kind See Schedule 5-A Transaction ID- 1280981	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19790.02		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	10049.09
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	81540.30