

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

Women's Campaign Forum

ADDRESS (number and street)

1900 L Street, NW Suite 500

☐Check if different
than previously
reported. (ACC)

Washington

DC

20036

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00424150

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☒Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 0

0 1

2 0 0 9

through

1 0

3 1

2 0 0 9

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

Type or Print Name of Treasurer

Siobhan Bennett

Signature of Treasurer

Electronically Filed by Siobhan Bennett

Date

0 2

2 0

2 0 1 0

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

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
Women's Campaign Forum

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																
6. (a) Cash on Hand January 1 <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		<table><tr><td>6</td><td>2</td><td>2</td><td>8</td><td>.</td><td>1</td><td>3</td></tr></table>	6	2	2	8	.	1	3	
Y	Y	Y	Y															
2	0	0	9															
6	2	2	8	.	1	3												
(b) Cash on Hand at Beginning of Reporting Period	<table><tr><td>1</td><td>8</td><td>2</td><td>4</td><td>3</td><td>.</td><td>6</td><td>2</td></tr></table>	1	8	2	4	3	.	6	2									
1	8	2	4	3	.	6	2											
(c) Total Receipts (from Line 19)	<table><tr><td>5</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td></tr></table>	5	0	0	.	0	0	<table><tr><td>2</td><td>3</td><td>2</td><td>7</td><td>8</td><td>.</td><td>0</td><td>0</td></tr></table>	2	3	2	7	8	.	0	0		
5	0	0	.	0	0													
2	3	2	7	8	.	0	0											
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table><tr><td>1</td><td>8</td><td>7</td><td>4</td><td>3</td><td>.</td><td>6</td><td>2</td></tr></table>	1	8	7	4	3	.	6	2	<table><tr><td>2</td><td>9</td><td>5</td><td>0</td><td>6</td><td>.</td><td>1</td><td>3</td></tr></table>	2	9	5	0	6	.	1	3
1	8	7	4	3	.	6	2											
2	9	5	0	6	.	1	3											
7. Total Disbursements (from Line 31)	<table><tr><td>9</td><td>5</td><td>8</td><td>0</td><td>.</td><td>9</td><td>3</td></tr></table>	9	5	8	0	.	9	3	<table><tr><td>2</td><td>0</td><td>3</td><td>4</td><td>0</td><td>.</td><td>4</td><td>4</td></tr></table>	2	0	3	4	0	.	4	4	
9	5	8	0	.	9	3												
2	0	3	4	0	.	4	4											
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td>9</td><td>1</td><td>6</td><td>2</td><td>.</td><td>6</td><td>9</td></tr></table>	9	1	6	2	.	6	9	<table><tr><td>9</td><td>1</td><td>6</td><td>5</td><td>.</td><td>6</td><td>9</td></tr></table>	9	1	6	5	.	6	9		
9	1	6	2	.	6	9												
9	1	6	5	.	6	9												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td>0</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td></tr></table>	0	0	0	.	0	0											
0	0	0	.	0	0													
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td>0</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td></tr></table>	0	0	0	.	0	0											
0	0	0	.	0	0													

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Women's Campaign Forum

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	500.00	23000.00
(ii) Unitemized	0.00	278.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	500.00	23278.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	500.00	23278.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	500.00	23278.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	500.00	23278.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	80.93	3340.44	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	80.93	3340.44	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	15000.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	2000.00	2000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	9580.93	20340.44	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9580.93	20340.44	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	500.00	23278.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	500.00	23278.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	80.93	3340.44
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	80.93	3340.44

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 13

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Women's Campaign Forum

A.

Full Name (Last, First, Middle Initial)

Yael H. Jekogian

Mailing Address 171 E 84th St. Apt 28E
Apt 28E

City	State	Zip Code
New York	NY	10028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stay at Home MomOccupation
Stay at Home Mom
 Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	9	

Transaction ID: C5612198

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 / 13

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

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum**A.**Full Name (Last, First, Middle Initial)
Bankcard Merchant

Mailing Address 7300 Chapman Hwy

City Knoxville State TN Zip Code 37920-6612

Purpose of Disbursement
Merchant Services Fees

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D327186

Date of Disbursement

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

Amount of Each Disbursement this Period

70.00

B.Full Name (Last, First, Middle Initial)
Wachovia BankMailing Address PO Box 40031
Wachovia Bank, Regional Servicente

City Roanoke State VA Zip Code 24022-0031

Purpose of Disbursement
Bank fees

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D318500

Date of Disbursement

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

Amount of Each Disbursement this Period

10.93

SUBTOTAL of Disbursements This Page (optional)

80.93

TOTAL This Period (last page this line number only)

80.93

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum**A.** Full Name (Last, First, Middle Initial)
ALLYSON SCHWARTZ FOR CONGRESS

Mailing Address P.O. Box 2232

City State Zip Code
Jenkintown PA 19046Purpose of Disbursement
Federal ContributionCandidate Name
ALLYSON SCHWARTZOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 13

Transaction ID: D318757

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	9

Amount of Each Disbursement this Period

250.00

B. Full Name (Last, First, Middle Initial)
Dede for Congress Inc

Mailing Address 63 GLEASON STREET

City State Zip Code
Gouverneur NY 13642Purpose of Disbursement
Federal ContributionCandidate Name
Ms. Dede ScozzafavaOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 23

Transaction ID: D318755

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	9

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
Kuster for Congress

Mailing Address PO BOX 1498

City State Zip Code
CONCORD NH 03302Purpose of Disbursement
Federal ContributionCandidate Name
Ms. Ann McLane-KusterOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 02

Transaction ID: D318756

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	9

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 9 / 13

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

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NAME OF COMMITTEE (In Full)

Women's Campaign Forum

A.

Full Name (Last, First, Middle Initial)

Martha Coakley for Senate Committee

Mailing Address PO BOX 220 STATE HOUSE STATION

City
Boston

State
MA

Zip Code
02133

Purpose of Disbursement
Federal Contribution

Candidate Name
Martha Coakley

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: MA

District:

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D318753

Date of Disbursement

10 / 23 / 2009

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

7500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum

A.

Full Name (Last, First, Middle Initial)
Annise Parker for Mayor

Mailing Address PO Box 66513

City Houston State TX Zip Code 77266

Purpose of Disbursement
Non-Federal Contribution

Candidate Name
Annise Parker

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D318777

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Cynthia Neff for Delegate

Mailing Address 2767 Pritchett Lane

City Charlottesville State VA Zip Code 22911

Purpose of Disbursement
Non-Federal Contribution

Candidate Name
Cynthia Neff

Office Sought: ☐ House
☐ Senate
☐ President

State: VA District:

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D318773

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Friends of Michele Iannello

Mailing Address 77 Carpenter Ave

City Buffalo State NY Zip Code 14223

Purpose of Disbursement
Non-Federal Contribution

Candidate Name
Michele Iannello

Office Sought: ☐ House
☐ Senate
☐ President

State: NY District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D318762

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 13

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

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum

A. Full Name (Last, First, Middle Initial) Friends of Jeanette Rishell Mailing Address PO Box 2174	Transaction ID: D318774 Date of Disbursement <div> <div>10</div> <div>23</div> <div>2009</div> </div>
City Manassas State VA Zip Code 20108 Purpose of Disbursement Non-Federal Contribution Candidate Name Jeanette Rishell Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>250.00</div> <div>011</div> Category/ Type
B. Full Name (Last, First, Middle Initial) Friends of Kathleen Rice Mailing Address PO Box 744 City Mineola State NY Zip Code 11501 Purpose of Disbursement Non-Federal Contribution Candidate Name Kathleen Rice Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D318767 Date of Disbursement <div>10</div> <div>23</div> <div>2009</div> Amount of Each Disbursement this Period <div>100.00</div> <div>011</div> Category/ Type
C. Full Name (Last, First, Middle Initial) Friends of Lisa Borders Mailing Address 135 Walton St NE City Atlanta State GA Zip Code 30303 Purpose of Disbursement Non-Federal Contribution Candidate Name Lisa Borders Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D318759 Date of Disbursement <div>10</div> <div>23</div> <div>2009</div> Amount of Each Disbursement this Period <div>500.00</div> <div>011</div> Category/ Type

SUBTOTAL of Disbursements This Page (optional)

850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum

A. Full Name (Last, First, Middle Initial) Friends of Margi Vanderhye	Transaction ID: D318775 Date of Disbursement																				
Mailing Address 801 Ridge Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	3		2	0	0	9												
City Mc Lean State VA Zip Code 22101	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non-Federal Contribution Candidate Name Margaret Vanderhye	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				
B. Full Name (Last, First, Middle Initial) Friends of Nora Bredes	Transaction ID: D318760 Date of Disbursement																				
Mailing Address PO Box 367	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	3		2	0	0	9												
City Pittsford State NY Zip Code 14534-0367	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non-Federal Contribution Candidate Name Nora Bredes	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 18 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				
C. Full Name (Last, First, Middle Initial) Friends of Pat O'Dwyer	Transaction ID: D318766 Date of Disbursement																				
Mailing Address 1 Vista Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	3		2	0	0	9												
City Chester State NY Zip Code 10918	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non-Federal Contribution Candidate Name Pat O'Dwyer	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 / 13

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

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NAME OF COMMITTEE (In Full)
Women's Campaign Forum

A. Full Name (Last, First, Middle Initial) Friends of Stephanie Hausner	Transaction ID: D318761 Date of Disbursement
Mailing Address 3 Frost Court	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 3 / 2 0 0 9</div> </div>
City State Zip Code New City NY 10956	Amount of Each Disbursement this Period
Purpose of Disbursement Non-Federal Contribution	<div>50.00</div>
Candidate Name Stephanie Hausner	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Friends to Elect Bernadette Watson	Transaction ID: D318778 Date of Disbursement
Mailing Address 762 E Michelle Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 3 / 2 0 0 9</div> </div>
City State Zip Code Cincinnati OH 45229	Amount of Each Disbursement this Period
Purpose of Disbursement Non-Federal Contribution	<div>100.00</div>
Candidate Name Bernadette Watson	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Suzanne Barclay 2009	Transaction ID: D318754 Date of Disbursement
Mailing Address 44 Piermont Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 3 / 2 0 0 9</div> </div>
City State Zip Code Piermont NY 10968	Amount of Each Disbursement this Period
Purpose of Disbursement Non-Federal Contribution	<div>100.00</div>
Candidate Name Suzanne Barclay	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

250.00

TOTAL This Period (last page this line number only)

2000.00