

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Progressive Womens Alliance of West Michigan

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

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

Type or Print Name of Treasurer Stacy Van Dyken

Signature of Treasurer Stacy Van Dyken [Electronically Filed] Date / /

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

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

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Progressive Womens Alliance of West Michigan

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>	<input type="text" value="1.92"/>	<input type="text" value="1.92"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1.92"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="12248.60"/>	<input type="text" value="12248.60"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="12250.52"/>	<input type="text" value="12250.52"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10000.00"/>	<input type="text" value="10000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2250.52"/>	<input type="text" value="2250.52"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="3500.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Progressive Womens Alliance of West Michigan

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5150.00	5150.00
(ii) Unitemized	7095.00	7095.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12245.00	12245.00
(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)	12245.00	12245.00
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.).....	3.60	3.60
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	12248.60	12248.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	12248.60	12248.60

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10000.00	10000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10000.00	10000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12245.00	12245.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12245.00	12245.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Progressive Womens Alliance of West Michigan

Full Name (Last, First, Middle Initial)
A. Melissa Anderson

Mailing Address 1581 Laraway Lake Drive

City State Zip Code
 Grand Rapids MI 49546

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

Name of Employer Occupation
 IRN, Incorporated Business Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2011
Transaction ID : SA11AI.5356

Amount of Each Receipt this Period
 200.00

donation

Full Name (Last, First, Middle Initial)
B. Dorothy Armstrong

Mailing Address 1231 Breton Rd SE

City State Zip Code
 Grand Rapids MI 49506

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

Name of Employer Occupation
 Grand Valley State Univ Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2011
Transaction ID : SA11AI.5407

Amount of Each Receipt this Period
 250.00

donation

Full Name (Last, First, Middle Initial)
C. Laurie Beard

Mailing Address 8500 Grand River Drive

City State Zip Code
 Grand Rapids MI 49301-9347

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

Name of Employer Occupation
 Founders Trust Bank CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2011
Transaction ID : SA11AI.5357

Amount of Each Receipt this Period
 250.00

donation

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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

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

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

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NAME OF COMMITTEE (In Full)
Progressive Womens Alliance of West Michigan

A. Susan Broman
Full Name (Last, First, Middle Initial)

Mailing Address 636 Fountain Street NW

City Grand Rapids State MI Zip Code 49503

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

Name of Employer Steelcase Foundation Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2011
Transaction ID : SA11AI.5358

Amount of Each Receipt this Period
 250.00

donation

B. Kathleen L. Bruinsma
Full Name (Last, First, Middle Initial)

Mailing Address 1748 Alexander St. SE

City Grand Rapids State MI Zip Code 49506

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

Name of Employer Myers, Nelson, Dillon & Shierk Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2011
Transaction ID : SA11AI.5403

Amount of Each Receipt this Period
 150.00

donation

C. Theresa Doyle
Full Name (Last, First, Middle Initial)

Mailing Address 2441 Cascade Springs Dr SE

City Grand Rapids State MI Zip Code 49546

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

Name of Employer Doyle & Ogden Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2011
Transaction ID : SA11AI.5426

Amount of Each Receipt this Period
 200.00

donation

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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

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

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

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NAME OF COMMITTEE (In Full)
Progressive Womens Alliance of West Michigan

A. Kayem Dunn
Full Name (Last, First, Middle Initial)
Mailing Address 636 Fountain NE

City Grand Rapids	State MI	Zip Code 49503
FEC ID number of contributing federal political committee. C		
Name of Employer Self - Kayem Dunn LLC	Occupation Organization Development Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
10 / 17 / 2011
Transaction ID : SA11AI.5359

Amount of Each Receipt this Period
250.00
donation

B. Daryl Fischer
Full Name (Last, First, Middle Initial)
Mailing Address 19632 North Shore Rd

City Spring Lake	State MI	Zip Code 49456
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Museum Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
09 / 27 / 2011
Transaction ID : SA11AI.5290

Amount of Each Receipt this Period
300.00
direct contribution

C. John Hunting
Full Name (Last, First, Middle Initial)
Mailing Address 161 Ottawa Avenue

City Grand Rapids	State MI	Zip Code 49503
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
10 / 17 / 2011
Transaction ID : SA11AI.5360

Amount of Each Receipt this Period
500.00
donation

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

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

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

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NAME OF COMMITTEE (In Full)
Progressive Womens Alliance of West Michigan

Full Name (Last, First, Middle Initial) A. Helga Kleinschmidt		Date of Receipt
Mailing Address 2100 River Lane SE		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
City	State	Zip Code
Grand Rapids	MI	49546
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.5401
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer		donation
None	Occupation	
	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Diann J. Landers		Date of Receipt
Mailing Address 161 Ottawa Ave NW STE 309E		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2011"/>
City	State	Zip Code
Grand Rapids	MI	49503
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.5361
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer		donation
Self	Occupation	
	Attorney	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Susan Lewis		Date of Receipt
Mailing Address 1144 Idema Drive SE		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
City	State	Zip Code
Grand Rapids	MI	49506
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.5368
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer		donation
None	Occupation	
	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="550.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

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NAME OF COMMITTEE (In Full)
Progressive Womens Alliance of West Michigan

Full Name (Last, First, Middle Initial)
A. Elizabeth Welch Lykins

Mailing Address 49 Morningside Drive SE

City State Zip Code
Grand Rapids MI 49506

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

Name of Employer Occupation
Self Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2011

Transaction ID : SA11AI.5363

Amount of Each Receipt this Period
350.00

donation

Full Name (Last, First, Middle Initial)
B. Deborah Mankoff

Mailing Address 3131 Southshire Avenue SE

City State Zip Code
E. Grand Rapids MI 49506

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

Name of Employer Occupation
Self Artist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2011

Transaction ID : SA11AI.5418

Amount of Each Receipt this Period
250.00

donation

Full Name (Last, First, Middle Initial)
C. Barbara Mayo-Johnson

Mailing Address 240 Gracewood Drive SE

City State Zip Code
East Grand Rapids MI 49506

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

Name of Employer Occupation
None None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2011

Transaction ID : SA11AI.5364

Amount of Each Receipt this Period
250.00

donation

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

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

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

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NAME OF COMMITTEE (In Full)
Progressive Womens Alliance of West Michigan

A. Richard Roane
Full Name (Last, First, Middle Initial)

Mailing Address 29 Pearl St. NW
Ste. 503

City Grand Rapids State MI Zip Code 49503

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

Name of Employer self - Richard Roane, PLLc Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 07 / 2011
Transaction ID : SA11AI.5424

Amount of Each Receipt this Period
250.00

donation

B. Brent Slay
Full Name (Last, First, Middle Initial)

Mailing Address 4166 Mystic Oak Court NE

City Grand Rapids State MI Zip Code 49525

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 14 / 2011
Transaction ID : SA11AI.5402

Amount of Each Receipt this Period
250.00

donation

c. Megan Smith
Full Name (Last, First, Middle Initial)

Mailing Address 100 Monroe Center NW

City Grand Rapids State MI Zip Code 49503

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

Name of Employer Smith, Haughey, Rice & Roegge Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 14 / 2011
Transaction ID : SA11AI.5371

Amount of Each Receipt this Period
250.00

donation

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 14
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Progressive Womens Alliance of West Michigan

A. Full Name (Last, First, Middle Initial)
Ellyn Wolfson

Mailing Address 7923 Loral Pines Drive

City Ada	State MI	Zip Code 49301
-------------	-------------	-------------------

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

Name of Employer None	Occupation Homemaker
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2011

Transaction ID : SA11AI.5428

Amount of Each Receipt this Period

200.00

donation

B. Full Name (Last, First, Middle Initial)

Mailing Address

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

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

--

C. Full Name (Last, First, Middle Initial)

Mailing Address

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

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	5150.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Progressive Womens Alliance of West Michigan

Full Name (Last, First, Middle Initial)

A. STABENOW FOR US SENATE

Mailing Address PO BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
campaign donation

011

Candidate Name

STABENOW FOR US SENATE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2011			

Transaction ID : SB23.5429

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. STABENOW FOR US SENATE

Mailing Address PO BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
Primary Campaign Contribution

011

Candidate Name

STABENOW FOR US SENATE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2011			

Transaction ID : SB23.5433

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--	--	--	--	--

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

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	0	0	0	0	0	0	0	0	0
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SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Progressive Womens Alliance of West Michigan** Transaction ID : **SC/10.4706**

LOAN SOURCE Full Name (Last, First, Middle Initial) Joan Bowman	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 220 W Saginaw Hwy #A-6	
City Grand Ledge State MI ZIP Code 48837	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3500.00	0.00	3500.00

TERMS

Date Incurred: MM / DD / YYYY / / Date Due: MM / DD / YYYY / / Interest Rate: % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	3500.00
TOTALS This Period (last page in this line only).....▶	3500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.