

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

ShePAC

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="2014"/>	<input type="text" value="31080.79"/>	<input type="text" value="31080.79"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="31080.79"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="43209.13"/>	<input type="text" value="43209.13"/>
(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="74289.92"/>	<input type="text" value="74289.92"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="22281.34"/>	<input type="text" value="22281.34"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="52008.58"/>	<input type="text" value="52008.58"/>
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="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

ShePAC

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).....	250.00	250.00
(ii) Unitemized	821.14	821.14
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1071.14	1071.14
(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)	1071.14	1071.14
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.).....	42137.99	42137.99
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))..... ▶	43209.13	43209.13
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	43209.13	43209.13

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	19181.34	19181.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	19181.34	19181.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
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	2100.00	2100.00
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)) ..	22281.34	22281.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22281.34	22281.34

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)	1071.14	1071.14
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1071.14	1071.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	19181.34	19181.34
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19181.34	19181.34

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

Form/Schedule: F3XN
Transaction ID :

Shepac did no advocacy in the period. All vendors in memo items over \$200 are listed.

Form/Schedule:
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 17
(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)
ShePAC

Full Name (Last, First, Middle Initial)
A. Michael Wolf

Mailing Address 5 Ivory Gull Place

City State Zip Code
Hilton Head Island SC 29926

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

Name of Employer Occupation
The MAY Department Stores Company Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : AEED45BC917D54D2C846

Amount of Each Receipt this Period
250.00

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

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	250.00

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

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

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NAME OF COMMITTEE (In Full)
ShePAC

A. Sheryl Neupert
Full Name (Last, First, Middle Initial)

Mailing Address 1603 Evergreen Point Road

City Medina	State WA	Zip Code 98039
----------------	-------------	-------------------

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

Name of Employer none	Occupation Retired Microsoft
--------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2014

Transaction ID : A6C2D9D1B3E384F74BFB

Amount of Each Receipt this Period
500.00

Non Federal Account

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

Mailing Address 54 Oxford Court

City Mystic	State CT	Zip Code 06355-1705
----------------	-------------	------------------------

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

Name of Employer Novartis	Occupation Public Relations Executive
------------------------------	--

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
01	/	29	/	2014

Transaction ID : A4A7D98F632784BC6AA9

Amount of Each Receipt this Period
250.00

Non Federal Account

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

Mailing Address P O BOX 97

City Hayes Center	State NE	Zip Code 69032
----------------------	-------------	-------------------

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

Name of Employer self	Occupation Retired
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2014

Transaction ID : AE735E647B3A84ECA89F

Amount of Each Receipt this Period
75.00

non federal account

SUBTOTAL of Receipts This Page (optional).....▶	825.00
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 9 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ShePAC

A. roger webb
Full Name (Last, First, Middle Initial)
Mailing Address 4585 Lakeside Dr.
City jacksonville State FL Zip Code 32210
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation photographer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 15 / 2014
Transaction ID : A91ABA19B17944B098AA
Amount of Each Receipt this Period 300.00
Non Federal Account

B. roger webb
Full Name (Last, First, Middle Initial)
Mailing Address 4585 Lakeside Dr.
City jacksonville State FL Zip Code 32210
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation photographer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 30 / 2014
Transaction ID : A890141CF14E9456196B
Amount of Each Receipt this Period 100.00
Non Federal Account

C. Kathy Widerborg
Full Name (Last, First, Middle Initial)
Mailing Address 1907 redbud ln
City Bloomington State IL Zip Code 61704-2773
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation surgeon
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 19 / 2014
Transaction ID : AACA1B8ABB5F64A18A00
Amount of Each Receipt this Period 500.00
non federal account

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
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 10 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial)
A. Franklin Kribbs

Mailing Address PO Box 1021

City Bacliff State TX Zip Code 77518-1021

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

Name of Employer self Occupation Inspector

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
02 / 26 / 2014

Transaction ID : **A9ADD0836B2F945F88D6**

Amount of Each Receipt this Period
300.00

Non Federal Account

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

Mailing Address 67 North Park Street

City Lebanon State NH Zip Code 03766-1317

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

Name of Employer Ringling Brothers Occupation Clown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
02 / 11 / 2014

Transaction ID : **AC4F94B1C0D07405B958**

Amount of Each Receipt this Period
250.00

Non Federal Account

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

Mailing Address 200 E Douglas St

City De Soto State IL Zip Code 62924-1512

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 ▼
299.00

Date of Receipt
02 / 10 / 2014

Transaction ID : **AD2B8429D88D848D2A06**

Amount of Each Receipt this Period
50.00

Non Federal Account

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 11 OF 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial)
A. jack buzbee
Mailing Address 200 E Douglas St
City De Soto State IL Zip Code 62924-1512
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 ▼ 249.00

Date of Receipt 01 / 30 / 2014
Transaction ID : A3D77966D84E44C5DB8E
Amount of Each Receipt this Period 99.00
Non Federal Account

Full Name (Last, First, Middle Initial)
B. jack buzbee
Mailing Address 200 E Douglas St
City De Soto State IL Zip Code 62924-1512
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 ▼ 349.00

Date of Receipt 02 / 28 / 2014
Transaction ID : ACD762FF75CA14BA2B19
Amount of Each Receipt this Period 50.00
Non Federal Account

Full Name (Last, First, Middle Initial)
C. jack buzbee
Mailing Address 200 E Douglas St
City De Soto State IL Zip Code 62924-1512
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 ▼ 399.00

Date of Receipt 03 / 27 / 2014
Transaction ID : A47E92D8D039A4770B9C
Amount of Each Receipt this Period 50.00
non federal account

SUBTOTAL of Receipts This Page (optional)..... ▶ 199.00
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 12 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ShePAC

A. James Kargman
Full Name (Last, First, Middle Initial)

Mailing Address 2223 N. Burling St

City Chicago State IL Zip Code 60614

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

Name of Employer national systems Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
02 / 10 / 2014
Transaction ID : A528803B437374AFA857

Amount of Each Receipt this Period
5000.00

Non Federal Account

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

Mailing Address 289 Puesta Del Sol Ln.

City El Paso State TX Zip Code 79912

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 10 / 2014
Transaction ID : A216888E6A2D64916AD5

Amount of Each Receipt this Period
1000.00

Non Federal Account

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

Mailing Address 3503 Westltn Ct.

City Richmond State TX Zip Code 77406

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

Name of Employer Gar Company/Copper State Rubber Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
01 / 30 / 2014
Transaction ID : A87FE5236507C4F9DAAF

Amount of Each Receipt this Period
500.00

Non Federal Account

SUBTOTAL of Receipts This Page (optional)..... ▶ 6500.00

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 13 OF 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial)
A. Kenneth Love

Mailing Address 3503 Westelm Ct

City Richmond State TX Zip Code 77406

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

Name of Employer The Gar Co dab Copper State Rubber Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014

Transaction ID : A8537BC42E9E74C19B9D

Amount of Each Receipt this Period
5000.00

Non Federal Account

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

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	14024.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
ShePAC

Full Name (Last, First, Middle Initial)

A. Nico and Lala

Mailing Address 8 E Chestnut St
3

City Chicago State IL Zip Code 60611-6063

Purpose of Disbursement
printing and design

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 21 / 2014

Transaction ID : B7BE08224B9CB47AF9B0

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Passcode Creative

Mailing Address 227 Third Ave N

City Columbia State MD Zip Code 21046-0000

Purpose of Disbursement
video production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : B1F1194ABA2644219983

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Global Payments

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117-5134

Purpose of Disbursement
merchant fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : B9B5ACAA662E5478BB5E

Amount of Each Disbursement this Period

103.00

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

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

2603.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
ShePAC

Full Name (Last, First, Middle Initial)

A. Hammerstone

Mailing Address 1701 Pennsylvania Ave., NW

City Washington State DC Zip Code 20006-5805

Purpose of Disbursement
printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2014

Transaction ID : B7164DF07C8A4481EBE7

Amount of Each Disbursement this Period

627.50

Full Name (Last, First, Middle Initial)

B. Aristotle

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
compliance software

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 27 / 2014

Transaction ID : B5587C0DD48A84E37B6D

Amount of Each Disbursement this Period

3225.00

Full Name (Last, First, Middle Initial)

C. Upstream Communications

Mailing Address 1609 Shoal Creek

City Adkins State TX Zip Code 78101-0000

Purpose of Disbursement
Internet fundraising and website mgmt.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2014

Transaction ID : BFB0F27BC116F4986833

Amount of Each Disbursement this Period

12622.84

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

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

16475.34

19078.34

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ShePAC

Full Name (Last, First, Middle Initial)

A. Erika for Congress

Mailing Address PO Box 368

City Urbana State IL Zip Code 61803-0368

Purpose of Disbursement
US House IL 13 Primary

Candidate Name
Erika Harold

Office Sought: House
 Senate
 President
State: IL District: 13

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 27 / 2014

Transaction ID : B15A25DFF121F4A978D1

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Katrina Pierson for Congress

Mailing Address PO Box 452213

City Garland State TX Zip Code 75045-2213

Purpose of Disbursement
US House TX 32 primary

Candidate Name
Katrina Pierson

Office Sought: House
 Senate
 President
State: TX District: 32

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 16 / 2014

Transaction ID : B9317F8BFC264476EB18

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

1000.00

1000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
ShePAC

Full Name (Last, First, Middle Initial)

A. National Foundation of Women Legislators

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2014

Mailing Address 1050 7th St. NW
#800

Transaction ID : B7FFC0421CDBA41D4A26

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Contribution to c3 organization

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

2000.00

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

2000.00
