

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.

EMILY's List

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:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input checked="" type="checkbox"/> 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 Ms. Caroline Fines

Signature of Treasurer Ms. Caroline Fines [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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

EMILY's List

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="2610100.31"/>	<input type="text" value="2610100.31"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2790647.55"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1619866.09"/>	<input type="text" value="25252640.41"/>
(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="4410513.64"/>	<input type="text" value="27862740.72"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1926845.52"/>	<input type="text" value="25379072.60"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2483668.12"/>	<input type="text" value="2483668.12"/>
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

EMILY's List

Report Covering the Period: From: 11 / 25 / 2014 To: 12 / 31 / 2014

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).....	444148.05	8334179.08
(ii) Unitemized	305634.00	7904145.85
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	749782.05	16238324.93
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	29500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	749782.05	16267824.93
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).....	31612.77	933318.70
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	28.50	1349.32
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	838442.77	8050147.46
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	838442.77	8050147.46
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1619866.09	25252640.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	781423.32	17202492.95

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	47097.56	735860.27
(ii) Non-Federal Share.....	47097.80	735863.18
(b) Other Federal Operating Expenditures	1835216.16	19311230.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1929411.52	20782953.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	2200000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	909607.04
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	1514.00	118637.89
(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)).....	1514.00	118637.89
29. Other Disbursements	-4080.00	1367873.70
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)) ..	1926845.52	25379072.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1879747.72	24643209.42

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)	749782.05	16267824.93
34. Total Contribution Refunds (from Line 28(d))	1514.00	118637.89
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	748268.05	16149187.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1882313.72	20047090.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	31612.77	933318.70
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1850700.95	19113772.09

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

Form/Schedule: F3XN
Transaction ID :

All expenditures on Schedule B, Lines 21(a) and 21(b) are to support Committee activities and are not made on behalf of specifically identified candidates. Also, all expenditures on Schedule B, Lines 21(a) and 21(b) are to support Committee activities and are not for public communication and voter drive activity containing express advocacy.

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 2648
(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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4527518

Amount of Each Receipt this Period
1368.00

Total Cntrbs through Conduit 11/25/14-12/31/14

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Mr. Joshua A. Aaronson

Mailing Address 3 Mitchell Pl

City State Zip Code
Glen Ridge NJ 07028

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

Name of Employer Occupation
Memorial Sloan-Kettering Cancer Center Benefits Manager

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
 12 / 29 / 2014
Transaction ID : 4242782

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Ms. Arlene H. Abady

Mailing Address 765 Carr St.

City State Zip Code
Lakewood CO 80214

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230150

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00

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 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Darlene Abbott Kordonowy
Full Name (Last, First, Middle Initial)

Mailing Address 15088 Sivertson Road NE

City Bainbridge Island State WA Zip Code 98110

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 ▼
455.00

Date of Receipt
11 / 25 / 2014
Transaction ID : 4230105

Amount of Each Receipt this Period
25.00

B. Ms. Darlene Abbott Kordonowy
Full Name (Last, First, Middle Initial)

Mailing Address 15088 Sivertson Road NE

City Bainbridge Island State WA Zip Code 98110

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 ▼
455.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233370

Amount of Each Receipt this Period
10.00

C. Ms. Fay H. Abelson
Full Name (Last, First, Middle Initial)

Mailing Address 300 Kildaire Woods Dr Apt 236

City Cary State NC Zip Code 27511

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

Name of Employer Occupation
Requested Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233085

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00

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 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Elisabeth Abram		Date of Receipt M M / D D / Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230171
Mailing Address 8605 Spring Lake Dr		Amount of Each Receipt this Period 50.00
City Mokena	State IL	Zip Code 60448
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Boutique Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Elisabeth Abram		Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240836
Mailing Address 8605 Spring Lake Dr		Amount of Each Receipt this Period 50.00
City Mokena	State IL	Zip Code 60448
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Boutique Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Ms. Joyce C. Abrams		Date of Receipt M M / D D / Y Y Y Y 12 / 14 / 2014 Transaction ID : 4235675
Mailing Address 5489 Takilma Road		Amount of Each Receipt this Period 35.00
City Cave Junction	State OR	Zip Code 97523
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 ▼ 620.00	

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 10 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Joyce C. Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address 5489 Takilma Road
 City Cave Junction State OR Zip Code 97523
 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 ▼ 620.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229622
 Amount of Each Receipt this Period
 50.00

B. Ms. Joyce C. Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address 5489 Takilma Road
 City Cave Junction State OR Zip Code 97523
 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 ▼ 620.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231925
 Amount of Each Receipt this Period
 50.00

C. Ms. Joyce C. Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address 5489 Takilma Road
 City Cave Junction State OR Zip Code 97523
 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 ▼ 620.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241384
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 2648
	<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)
EMILY's List

A. Ms. Joyce C. Abrams
Full Name (Last, First, Middle Initial)
Mailing Address 5489 Takilma Road
City Cave Junction State OR Zip Code 97523
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 ▼ 620.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014
Transaction ID : 4243418
Amount of Each Receipt this Period
50.00

B. Ms. Dorothy Abts
Full Name (Last, First, Middle Initial)
Mailing Address 6625 Midtown Rd
City Siren State WI Zip Code 54872
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2014
Transaction ID : 4236095
Amount of Each Receipt this Period
15.00

C. Nancy Achilles
Full Name (Last, First, Middle Initial)
Mailing Address 411 Burnett Avenue
City San Francisco State CA Zip Code 94131
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Writer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4229838
Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	215.00
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 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Nancy Achilles
 Full Name (Last, First, Middle Initial)
 Mailing Address 411 Burnett Avenue
 City San Francisco State CA Zip Code 94131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240858
 Amount of Each Receipt this Period
 150.00

B. Ms. Sandra Ackerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1025 Dacian Avenue
 City Durham State NC Zip Code 27701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Scientist Magazine Occupation Editor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233344
 Amount of Each Receipt this Period
 50.00

C. Ms. Sandra Ackerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1025 Dacian Avenue
 City Durham State NC Zip Code 27701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Scientist Magazine Occupation Editor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234588
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Shelley Hirsch Ackerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 446 Spruce Ln
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232611
 Amount of Each Receipt this Period
 18.00

B. Dr. Irving Paul Ackerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1960 N. Edgemont St.
 City Los Angeles State CA Zip Code 90027
 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 ▼ 940.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230164
 Amount of Each Receipt this Period
 60.00

C. Dr. Irving Paul Ackerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1960 N. Edgemont St.
 City Los Angeles State CA Zip Code 90027
 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 ▼ 940.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240819
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 138.00
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 14 OF 2648
	<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)
EMILY's List

A. Ms. Joan E. Adam
Full Name (Last, First, Middle Initial)
Mailing Address 5401 Brookside Blvd #608

City Kansas City	State MO	Zip Code 64112
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	30	/	2014

Transaction ID : 4229654

Amount of Each Receipt this Period

100.00

B. Ms. Joan E. Adam
Full Name (Last, First, Middle Initial)
Mailing Address 5401 Brookside Blvd #608

City Kansas City	State MO	Zip Code 64112
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	16	/	2014

Transaction ID : 4237186

Amount of Each Receipt this Period

100.00

C. Mr. Robert M. C. Adams
Full Name (Last, First, Middle Initial)
Mailing Address 9753 Keeneland Row

City La Jolla	State CA	Zip Code 92037
------------------	-------------	-------------------

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

Name of Employer None	Occupation Anthropologist, Retired
--------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3613.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	19	/	2014

Transaction ID : 4238360

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 15 OF 2648
	<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

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert M. C. Adams		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014
Mailing Address 9753 Keeneland Row		Transaction ID : 4237887
City La Jolla	State CA	Zip Code 92037
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer None	Occupation Anthropologist, Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3613.00	

Full Name (Last, First, Middle Initial) B. Ms. Mignon S. Adams		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014
Mailing Address 1919 Chestnut St Apt 2721		Transaction ID : 4237935
City Philadelphia	State PA	Zip Code 19103
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
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 ▼ 220.00	

Full Name (Last, First, Middle Initial) C. E. Dwight Adams		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2014
Mailing Address 2507 NW 24 Ter		Transaction ID : 4239133
City Gainesville	State FL	Zip Code 32605
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5.00	
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 ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	305.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 2648
	<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)
EMILY's List

A. E. Dwight Adams
Full Name (Last, First, Middle Initial)

Mailing Address 2507 NW 24 Ter

City Gainesville State FL Zip Code 32605

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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4239696

Amount of Each Receipt this Period
 15.00

B. Ms. Roberta L. Adams
Full Name (Last, First, Middle Initial)

Mailing Address P O Box 12833

City Olympia State WA Zip Code 98508

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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4228439

Amount of Each Receipt this Period
 50.00

C. Ms. Roberta L. Adams
Full Name (Last, First, Middle Initial)

Mailing Address P O Box 12833

City Olympia State WA Zip Code 98508

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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4241847

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00

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 17 OF 2648
	<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)
EMILY's List

A. Ms. Melissa Adams
Full Name (Last, First, Middle Initial)
Mailing Address 212 Ayr Hill Ave NE
City Vienna State VA Zip Code 22180
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Energy & Enviro Cnslt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 450.00

Date of Receipt 12 / 02 / 2014
Transaction ID : 4230907
Amount of Each Receipt this Period 50.00

B. Ms. Lynda G. Adamson
Full Name (Last, First, Middle Initial)
Mailing Address 2717 N Fillmore St
City Arlington State VA Zip Code 22207
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 220.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4234953
Amount of Each Receipt this Period 20.00

C. Ms. Muriel W. Adcock
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 5298
City Larkspur State CA Zip Code 94977
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Educator
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 3875.00

Date of Receipt 12 / 22 / 2014
Transaction ID : 4238044
Amount of Each Receipt this Period 1200.00

SUBTOTAL of Receipts This Page (optional)..... 1270.00
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 18 OF 2648
	<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)
EMILY's List

A. Daniel Adkins
Full Name (Last, First, Middle Initial)

Mailing Address 4390 Lorcom Lane #707

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4229918

Amount of Each Receipt this Period
5.00

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

Mailing Address 4390 Lorcom Lane #707

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4239697

Amount of Each Receipt this Period
5.00

C. Ms. Susan S Adler
Full Name (Last, First, Middle Initial)

Mailing Address 161 E Chicago Ave

City State Zip Code
Chicago IL 60611

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 ▼
1865.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2014
Transaction ID : 4232104

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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 19 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Corinne L. Adler

Mailing Address 210 Beacon Street

City Boston State MA Zip Code 02116

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

Name of Employer Self-Employed Occupation Nutritionist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238361

Amount of Each Receipt this Period
 35.00

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

Mailing Address 88 Masonic Home Road H400

City Charlton State MA Zip Code 01507

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

Name of Employer Vicomp Management, Inc. Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **261.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232069

Amount of Each Receipt this Period
 12.00

Full Name (Last, First, Middle Initial)
C. Mr. Lawrence L. Adrian

Mailing Address 101 Kaitlin Drive

City Durham State NC Zip Code 27713

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 ▼ **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227576

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **197.00**

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 20 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Mary Agatstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 1350 41st St.
 City Sacramento State CA Zip Code 95819
 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 ▼
 700.00

Date of Receipt
 12 / 05 / 2014
Transaction ID : 4233046
 Amount of Each Receipt this Period
 200.00

B. Ms. Karen Agnew
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 Morton Road
 City Newton State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Granahan Investment Mgmt Marketing
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1020.00

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4238363
 Amount of Each Receipt this Period
 85.00

C. Tracie Ahern
 Full Name (Last, First, Middle Initial)
 Mailing Address 276 Cedar Ave
 City Manasquan State NJ Zip Code 08736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Soros Fund Management Cfo
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 12 / 20 / 2014
Transaction ID : 4239312
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	310.00
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 21 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Gary Aigen		Date of Receipt 12 / 14 / 2014 Transaction ID : 4235390
Mailing Address 58 Midwood St		Amount of Each Receipt this Period 10.00
City Brooklyn	State NY	Zip Code 11225
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 520.00
Name of Employer None	Occupation Real Estate Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Gary Aigen		Date of Receipt 12 / 13 / 2014 Transaction ID : 4236207
Mailing Address 58 Midwood St		Amount of Each Receipt this Period 25.00
City Brooklyn	State NY	Zip Code 11225
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 520.00
Name of Employer None	Occupation Real Estate Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Leyla Aker		Date of Receipt 12 / 14 / 2014 Transaction ID : 4235676
Mailing Address 66 Cleary Court #803		Amount of Each Receipt this Period 500.00
City San Francisco	State CA	Zip Code 94109
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 500.00
Name of Employer None	Occupation Book Editor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	535.00
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 22 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Herant Akmajian

Mailing Address 3034 E 6th St
Unit 58

City Tucson State AZ Zip Code 85716

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 ▼
270.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230265

Amount of Each Receipt this Period
57.00

Full Name (Last, First, Middle Initial)
B. Mrs. Lois E. Albert

Mailing Address PO Box 721955

City Norman State OK Zip Code 73070

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 ▼
245.00

Date of Receipt
12 / 12 / 2014
Transaction ID : 4235211

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Ms. Jean S. Albert

Mailing Address 250 W, 15th St. #2F

City New York State NY Zip Code 10011

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

Name of Employer Urs Corporation Occupation Marketing Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
12 / 29 / 2014
Transaction ID : 4242535

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 307.00

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 23 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Raymond Albert

Mailing Address 1110 Grove St Apt 2b

City Downers Grove State IL Zip Code 60515

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230267

Amount of Each Receipt this Period
168.00

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

Mailing Address 5806 Old Village RD

City Yorba Linda State CA Zip Code 92887

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 ▼
322.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235275

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
C. Ms. Amelia Ann Alexander

Mailing Address 3114 Fairhope Street

City Houston State TX Zip Code 77025

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236861

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 303.00

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 24 OF 2648
	<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)
EMILY's List

A. Mr. John Alexander
Full Name (Last, First, Middle Initial)
Mailing Address 710 Pennsylvania St
City Ashland State OR Zip Code 97520
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 ▼ 450.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233253
Amount of Each Receipt this Period
50.00

B. Mr. Ralph W. Alexander , Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 105 Woodland Dr.
City Rolla State MO Zip Code 65401
FEC ID number of contributing federal political committee. **C**
Name of Employer U of MO Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233051
Amount of Each Receipt this Period
120.00

c. Ms. Glenda Algozzini
Full Name (Last, First, Middle Initial)
Mailing Address 8629 Wild Bird Ct
City Charleston State SC Zip Code 29420
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231583
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 195.00
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 25 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Patrick Allen

Mailing Address 2555 Pennsylvania Ave NW Apt 917

City Washington State DC Zip Code 20037

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

Name of Employer District of Columbia Government Occupation Lawyer

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
 12 / 01 / 2014
Transaction ID : 4230269

Amount of Each Receipt this Period
225.00

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

Mailing Address 23714 Carlisle

City Hazel Park State MI Zip Code 48030

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240897

Amount of Each Receipt this Period
20.00

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

Mailing Address 23714 Carlisle

City Hazel Park State MI Zip Code 48030

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 29 / 2014
Transaction ID : 4229516

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **295.00**

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 26 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet H. Allen		Date of Receipt
Mailing Address 620 Sugarberry Rd.		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chapel Hill	NC	27514
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4233995
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1200.00"/>	

Full Name (Last, First, Middle Initial) B. Mrs. Kay W. Allen		Date of Receipt
Mailing Address 2408 N. Pierce St.		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Little Rock	AR	72207
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4228341
Name of Employer	Occupation	Amount of Each Receipt this Period
Requested	Requested	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) C. Mrs. Kay W. Allen		Date of Receipt
Mailing Address 2408 N. Pierce St.		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Little Rock	AR	72207
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4241179
Name of Employer	Occupation	Amount of Each Receipt this Period
Requested	Requested	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 28 OF 2648
	<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)
EMILY's List

A. Ms. Phyllis Alroy
Full Name (Last, First, Middle Initial)
Mailing Address 1643 Pennington RD
City Ewing State NJ Zip Code 08618
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 ▼ 221.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 22 / 2014
Transaction ID : 4239521
Amount of Each Receipt this Period
20.00

B. Ms. Linda Altland
Full Name (Last, First, Middle Initial)
Mailing Address 53 Heather Ct
City Newtown State PA Zip Code 18940
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 27 / 2014
Transaction ID : 4228301
Amount of Each Receipt this Period
10.00

C. Ms. Linda Altland
Full Name (Last, First, Middle Initial)
Mailing Address 53 Heather Ct
City Newtown State PA Zip Code 18940
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 08 / 2014
Transaction ID : 4233377
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00
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 29 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda Altland		Date of Receipt
Mailing Address 53 Heather Ct		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City Newtown	State PA	Zip Code 18940
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4240982
Name of Employer None	Occupation None	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Janet Kyle Altman		Date of Receipt
Mailing Address 5935 SW 76th Street		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City South Miami	State FL	Zip Code 33143
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4227594
Name of Employer Kaufman, Rossin & Co.	Occupation Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="83.33"/>
	<input type="text" value="858.30"/>	

Full Name (Last, First, Middle Initial) C. Ms. Jean L. Ambrose		Date of Receipt
Mailing Address 7305 Westover Way		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City Somerset	State NJ	Zip Code 08873
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4238367
Name of Employer None	Occupation None	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
	<input type="text" value="450.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="143.33"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 30 OF 2648
	<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)
EMILY's List

A. Bruce Ambuel
Full Name (Last, First, Middle Initial)

Mailing Address 17570 St. James Road

City Brookfield	State WI	Zip Code 53045
--------------------	-------------	-------------------

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

Name of Employer Bruce Ambuel Photography	Occupation Photographer
--	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228443

Amount of Each Receipt this Period

50.00

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

Mailing Address 17570 St. James Road

City Brookfield	State WI	Zip Code 53045
--------------------	-------------	-------------------

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

Name of Employer Bruce Ambuel Photography	Occupation Photographer
--	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	19	/	2014

Transaction ID : 4238368

Amount of Each Receipt this Period

50.00

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

Mailing Address 17570 St. James Road

City Brookfield	State WI	Zip Code 53045
--------------------	-------------	-------------------

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

Name of Employer Bruce Ambuel Photography	Occupation Photographer
--	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241625

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 31 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Diane Kellner Ammons		Date of Receipt
Mailing Address 420 Monadnock St		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Troy	NH	03465
FEC ID number of contributing federal political committee.		Transaction ID : 4228444
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
Rivermead Retirement Community	Cook	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="265.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Diane Kellner Ammons		Date of Receipt
Mailing Address 420 Monadnock St		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
Troy	NH	03465
FEC ID number of contributing federal political committee.		Transaction ID : 4232455
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
Rivermead Retirement Community	Cook	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="265.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Diane Kellner Ammons		Date of Receipt
Mailing Address 420 Monadnock St		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Troy	NH	03465
FEC ID number of contributing federal political committee.		Transaction ID : 4241850
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
Rivermead Retirement Community	Cook	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="265.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 32 OF 2648
	<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)
EMILY's List

A. Dr. Kathryn M. Anastos , M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Lewis Parkway
 City Yonkers State NY Zip Code 10705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Montefiore Medical Center Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230193
 Amount of Each Receipt this Period
 100.00

B. Dr. Kathryn M. Anastos , M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Lewis Parkway
 City Yonkers State NY Zip Code 10705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Montefiore Medical Center Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 25 / 2014
Transaction ID : 4244910
 Amount of Each Receipt this Period
 100.00

C. Ms. Janice Anderman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3400 Stevenson Blvd Apt Q18
 City Fremont State CA Zip Code 94538
 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 ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234477
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	215.00
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 33 OF 2648
	<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)
EMILY's List

A. Ms. Carolyn Anders
Full Name (Last, First, Middle Initial)
Mailing Address 4842 Maytime Ln.
City Culver City State CA Zip Code 90230
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 ▼ 400.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231477
Amount of Each Receipt this Period
100.00

B. Ms. Ann K. Andersen
Full Name (Last, First, Middle Initial)
Mailing Address 10606 Danesway Ln
City Cornelius State NC Zip Code 28031
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 ▼ 210.00

Date of Receipt
12 / 17 / 2014
Transaction ID : 4237718
Amount of Each Receipt this Period
15.00

C. Barbara Anderson
Full Name (Last, First, Middle Initial)
Mailing Address 300 Walnut Hills Dr.
City Zanesville State OH Zip Code 43701
FEC ID number of contributing federal political committee. **C**
Name of Employer Board Of Elections Occupation Administrative Support
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
12 / 22 / 2014
Transaction ID : 4238322
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.00
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 34 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Joan Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3424 Monitor Lane
 City State Zip Code
 Tallahassee FL 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Humphrey Anderson Law Firm Requested
 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
 12 / 13 / 2014
Transaction ID : 4236210
 Amount of Each Receipt this Period
 25.00

B. Porter W. Anderson , Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 378492
 City State Zip Code
 Key Largo FL 33037
 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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236704
 Amount of Each Receipt this Period
 25.00

C. Ms. Joan Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 951 Windrove Drive
 City State Zip Code
 Nashville TN 37205
 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 ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236639
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 35 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Hope S. Anderson		Date of Receipt
Mailing Address 75 Laurel Drive		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Needham	MA	02492
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4228445
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Hope S. Anderson		Date of Receipt
Mailing Address 75 Laurel Drive		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Needham	MA	02492
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4241686
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Charlane T. Anderson		Date of Receipt
Mailing Address 1136 N. Walnut Ave.		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
Arlington Heights	IL	60004
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4238284
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="170.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 36 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Rebecca Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 000 Wesley Dr. 20D
 City Asheville State NC Zip Code 28803
 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 ▼ 375.00

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4230911
 Amount of Each Receipt this Period
 225.00

B. Ms. Ada J. Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1218 E 125th St
 City Olathe State KS Zip Code 66061
 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 ▼ 400.00

Date of Receipt
 12 / 30 / 2014
Transaction ID : 4243120
 Amount of Each Receipt this Period
 100.00

C. Mr. Clifford Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1408 La Sierra Dr
 City Sacramento State CA Zip Code 95864
 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 ▼ 1200.00

Date of Receipt
 12 / 29 / 2014
Transaction ID : 4242442
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 37 OF 2648
	<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)
EMILY's List

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

Mailing Address 1408 La Sierra Dr

City Sacramento	State CA	Zip Code 95864
--------------------	-------------	-------------------

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 ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4227388

Amount of Each Receipt this Period
100.00

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

Mailing Address 17014 280Th St

City Columbus	State NE	Zip Code 68601
------------------	-------------	-------------------

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

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

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
12	/	23	/	2014

Transaction ID : 4239702

Amount of Each Receipt this Period
25.00

C. Ms. April A. Anderson
Full Name (Last, First, Middle Initial)

Mailing Address 201 Mason Dr.

City Newark	State DE	Zip Code 19711
----------------	-------------	-------------------

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 ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228447

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	155.00
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 38 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

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

Mailing Address 201 Mason Dr.

City Newark State DE Zip Code 19711

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 ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241852

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. Ms. Bonnie S. Anderson

Mailing Address 38 Seventh Ave. #2

City Brooklyn State NY Zip Code 11217

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

Name of Employer Self Occupation Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228448

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Ms. Bonnie S. Anderson

Mailing Address 38 Seventh Ave. #2

City Brooklyn State NY Zip Code 11217

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

Name of Employer Self Occupation Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241853

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 39 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jace Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3613 Laurel Canyon Blvd
 City State Zip Code
 Studio City CA 91604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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
 12 / 06 / 2014
Transaction ID : 4232427
 Amount of Each Receipt this Period
 25.00

B. Ms. Kathy Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4116 Radcliff Ct.
 City State Zip Code
 Midland TX 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 313.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4232422
 Amount of Each Receipt this Period
 10.00

C. Ms. Janice Anderson-Gram
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 Venado Drive
 City State Zip Code
 Belvedere Tiburon CA 94920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : 4232266
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 40 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Emily S. Andrews
 Full Name (Last, First, Middle Initial)
 Mailing Address 4817 V Street NW
 City Washington State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 03 / 2014
Transaction ID : 4231758
 Amount of Each Receipt this Period
 100.00

B. Donna Andrews
 Full Name (Last, First, Middle Initial)
 Mailing Address 715 Mt. Paradise Dr.
 City Grants Pass State OR Zip Code 97526
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234090
 Amount of Each Receipt this Period
 25.00

C. Ms. Martha K. Andrews
 Full Name (Last, First, Middle Initial)
 Mailing Address 884 Chestnut Cir.
 City Greenville State OH Zip Code 45331
 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230274
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 41 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy J. Angove		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240333
Mailing Address 3199 White Cir.		Amount of Each Receipt this Period 30.00
City Marina	State CA	Zip Code 93933
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 ▼ 215.00	

Full Name (Last, First, Middle Initial) B. Sarah Anson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236096
Mailing Address 4439 Kaloloku Rd., Apt.C		Amount of Each Receipt this Period 25.00
City Kapaa	State HI	Zip Code 96746
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.36	

Full Name (Last, First, Middle Initial) C. Mr. Bascom F. Anthony		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237520
Mailing Address 9412 Winterset Drive		Amount of Each Receipt this Period 100.00
City Potomac	State MD	Zip Code 20854
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	155.00
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 42 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mennana Anyadike

Mailing Address 30 Greenway St NW
Suite 4

City State Zip Code
Glen Burnie MD 21061

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

Name of Employer Occupation
Greenway Orthodontics B. Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2014
Transaction ID : 4232522

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
B. Ms. Judith Apfel

Mailing Address 1730 5th St.

City State Zip Code
Concord CA 94159

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

Name of Employer Occupation
None Retired

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
12 / 02 / 2014
Transaction ID : 4230915

Amount of Each Receipt this Period
150.00

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

Mailing Address 1 Golden Eagle Lane

City State Zip Code
Clarion PA 16214

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

Name of Employer Occupation
Clarion University Of Pennsylvania Educator

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 / 30 / 2014
Transaction ID : 4230223

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00

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 43 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Peggy Apple

Mailing Address 1 Golden Eagle Lane

City Clarion State PA Zip Code 16214

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

Name of Employer Clarion University Of Pennsylvania Occupation Educator

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
 12 / 30 / 2014
Transaction ID : 4244933

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Ms. Rima D. Apple

Mailing Address 2013 Madison Street

City Madison State WI Zip Code 53711

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1010.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236407

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Ms. Anne B. Appleby

Mailing Address 5505 Fadling Rd. SW

City Olympia State WA Zip Code 98512

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

Name of Employer Self Occupation Shellfish Farmer

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
 12 / 15 / 2014
Transaction ID : 4236964

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **375.00**

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 44 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Wendy Apter
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Groendyke Circle
 City Millstone Twp State NJ Zip Code 08535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer West Computers Occupation Data Verification
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232751
 Amount of Each Receipt this Period
 20.00

B. Wendy Apter
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Groendyke Circle
 City Millstone Twp State NJ Zip Code 08535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer West Computers Occupation Data Verification
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238371
 Amount of Each Receipt this Period
 20.00

C. Susan Aradeon
 Full Name (Last, First, Middle Initial)
 Mailing Address 2980 Point East Dr Apt D105
 City Aventura State FL Zip Code 33160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 715.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231279
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 45 OF 2648
	<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)
EMILY's List

A. Ms. Susan B. Ardis
Full Name (Last, First, Middle Initial)

Mailing Address 8100 Bearcreek

City Austin State TX Zip Code 78737

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

Name of Employer Ut Occupation Librarian

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 267.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236211

Amount of Each Receipt this Period
 10.00

B. Mr. Robert L. Arends
Full Name (Last, First, Middle Initial)

Mailing Address 10951 Johnson Blvd Apt H607

City Seminole State FL Zip Code 33772

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 353.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232424

Amount of Each Receipt this Period
 25.00

C. Mr. Gregory Arenson
Full Name (Last, First, Middle Initial)

Mailing Address 125 W. 76th Street Apt. 2A

City New York State NY Zip Code 10023

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

Name of Employer Kaplan Fox & Kilsheimev Llp Occupation Attorney

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
 12 / 30 / 2014
Transaction ID : 4242719

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 46 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Allen Arieff		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233308
Mailing Address 299 South St.		Amount of Each Receipt this Period 100.00
City Sausalito	State CA	Zip Code 94965
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Ms. Beth Arman		Date of Receipt 12 / 28 / 2014 Transaction ID : 4241855
Mailing Address 1721 Arlington Avenue		Amount of Each Receipt this Period 50.00
City Halethorpe	State MD	Zip Code 21227
FEC ID number of contributing federal political committee. C		
Name of Employer Community College Of Baltimore County	Occupation Community College Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mrs. Suzanne Armentrout		Date of Receipt 12 / 03 / 2014 Transaction ID : 4231570
Mailing Address 2333 W. 13th St.		Amount of Each Receipt this Period 35.00
City The Dalles	State OR	Zip Code 97058
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 ▼ 526.00	

SUBTOTAL of Receipts This Page (optional).....▶	185.00
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 47 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Armitage		Date of Receipt
Mailing Address 6535 N. Fenwick		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City Portland State OR Zip Code 97217		Transaction ID : 4235838
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation None None		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="350.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Susan Armitage		Date of Receipt
Mailing Address 6535 N. Fenwick		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Portland State OR Zip Code 97217		Transaction ID : 4234335
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation None None		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="350.00"/>

Full Name (Last, First, Middle Initial) C. Dr. Guillermo W. Arnaud		Date of Receipt
Mailing Address 121 S Mockingbird Ln		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City Tahlequah State OK Zip Code 74464		Transaction ID : 4237822
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Cherokee Nation Health Services Surgeon		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="839.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 48 OF 2648
	<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)
EMILY's List

A. Dr. Guillermo W. Arnaud
Full Name (Last, First, Middle Initial)

Mailing Address 121 S Mockingbird Ln

City State Zip Code
Tahlequah OK 74464

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

Name of Employer Occupation
Cherokee Nation Health Services Surgeon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
839.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014
Transaction ID : 4227785

Amount of Each Receipt this Period
100.00

B. Ms. Susanna B. Arnold
Full Name (Last, First, Middle Initial)

Mailing Address 93 Foulkeways

City State Zip Code
Gwynedd PA 19436

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
328.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4227627

Amount of Each Receipt this Period
35.00

C. Mr. Ted Arnold
Full Name (Last, First, Middle Initial)

Mailing Address 61 Saint Lawrence Street

City State Zip Code
Portland ME 04101

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 ▼
575.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4229682

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	160.00
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 49 OF 2648
	<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)
EMILY's List

A. Mr. Ted Arnold
Full Name (Last, First, Middle Initial)

Mailing Address 61 Saint Lawrence Street

City Portland State ME Zip Code 04101

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

Name of Employer Self Occupation Artist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238374

Amount of Each Receipt this Period
25.00

B. Mr. Ted Arnold
Full Name (Last, First, Middle Initial)

Mailing Address 61 Saint Lawrence Street

City Portland State ME Zip Code 04101

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

Name of Employer Self Occupation Artist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240752

Amount of Each Receipt this Period
25.00

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

Mailing Address PO Box 648

City Groton State CT Zip Code 06340

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

Name of Employer Self-Employed Occupation Writer/Editor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **265.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228327

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **65.00**

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 50 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Marion Arnold		Date of Receipt 12 / 27 / 2014 Transaction ID : 4241170
Mailing Address PO Box 648		Amount of Each Receipt this Period 15.00
City Groton	State CT	Zip Code 06340
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Writer/Editor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

Full Name (Last, First, Middle Initial) B. Kathi Arnow		Date of Receipt 12 / 24 / 2014 Transaction ID : 4240261
Mailing Address 18 Harris Rd		Amount of Each Receipt this Period 50.00
City Katonah	State NY	Zip Code 10536
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 ▼ 1600.00	

Full Name (Last, First, Middle Initial) C. Ms. Rose Aronin		Date of Receipt 12 / 15 / 2014 Transaction ID : 4244772
Mailing Address 1350 Main St Unit 1102		Amount of Each Receipt this Period 21.00
City Sarasota	State FL	Zip Code 34236
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 ▼ 262.00	

SUBTOTAL of Receipts This Page (optional).....▶	86.00
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 51 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Lorraine M. Aronson
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 160
 City State Zip Code
 Bernard ME 04612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4233967
 Amount of Each Receipt this Period
 300.00

B. Mr. Manuel Arruda
 Full Name (Last, First, Middle Initial)
 Mailing Address 351 S Oxford St.
 City State Zip Code
 Fall River MA 02721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Ace Security Services Security Guard
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234852
 Amount of Each Receipt this Period
 20.00

C. Ms. Sheila Ary
 Full Name (Last, First, Middle Initial)
 Mailing Address 526 Russell Road
 City State Zip Code
 DeKalb IL 60115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 05 / 2014
Transaction ID : 4232724
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 340.00
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 52 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Hank Asch
Full Name (Last, First, Middle Initial)

Mailing Address 319 Southampton Blvd.

City Auburndale State FL Zip Code 33823

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

Name of Employer Self Occupation Napper

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014

Transaction ID : 4232792

Amount of Each Receipt this Period
 20.00

B. Ms. Verna Asplen
Full Name (Last, First, Middle Initial)

Mailing Address 1102 Travers Street

City Cambridge State MD Zip Code 21613

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4228457

Amount of Each Receipt this Period
 20.00

C. Ms. Verna Asplen
Full Name (Last, First, Middle Initial)

Mailing Address 1102 Travers Street

City Cambridge State MD Zip Code 21613

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4241858

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 53 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Thomas A. Asprey		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228458
Mailing Address PO Box 1867		Amount of Each Receipt this Period 10.00
City Boulder	State CO	Zip Code 80306
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	

Full Name (Last, First, Middle Initial) B. Thomas A. Asprey		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241390
Mailing Address PO Box 1867		Amount of Each Receipt this Period 10.00
City Boulder	State CO	Zip Code 80306
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	

Full Name (Last, First, Middle Initial) C. Thomas A. Asprey		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238377
Mailing Address PO Box 1867		Amount of Each Receipt this Period 25.00
City Boulder	State CO	Zip Code 80306
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 54 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Donna J. Astrauskas
 Full Name (Last, First, Middle Initial)
 Mailing Address 260 Michael Dr.
 City Troy State IL Zip Code 62294
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243291
 Amount of Each Receipt this Period
 15.00

B. Susan Atkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 3060 Cranbrook
 City La Jolla State CA Zip Code 92037
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233700
 Amount of Each Receipt this Period
 25.00

C. Elizabeth Atkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 44 Juniper Rd.
 City Belmont State MA Zip Code 02478
 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 ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236890
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	190.00
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 56 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Tammy Atwood
 Full Name (Last, First, Middle Initial)
 Mailing Address 417 Meadow Ridge Drive
 City Tallahassee State FL Zip Code 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Florida State University Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240850
 Amount of Each Receipt this Period
 100.00

B. Pamela Auble
 Full Name (Last, First, Middle Initial)
 Mailing Address 1542 Coat Ridge Road
 City Herndon State VA Zip Code 20170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer George Mason University Occupation Technical Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232000
 Amount of Each Receipt this Period
 35.00

C. Garry Ault
 Full Name (Last, First, Middle Initial)
 Mailing Address 325 N. Gail Circle
 City Boise State ID Zip Code 83706
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4230916
 Amount of Each Receipt this Period
 45.00

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 57 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Craig L Auster
 Full Name (Last, First, Middle Initial)
 Mailing Address 636 Massachusetts Avenue NE
 City Washington State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer League Of Conservation Voters Occupation Donor Advocacy Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1760.16

Date of Receipt
 11 / 26 / 2014
Transaction ID : 4235339
 Amount of Each Receipt this Period
 15.00

B. Mr. Craig L Auster
 Full Name (Last, First, Middle Initial)
 Mailing Address 636 Massachusetts Avenue NE
 City Washington State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer League Of Conservation Voters Occupation Donor Advocacy Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1760.16

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236564
 Amount of Each Receipt this Period
 150.00

C. Ms. Teresa Austin
 Full Name (Last, First, Middle Initial)
 Mailing Address 3505 167th St., Apt. 14
 City Flushing State NY Zip Code 11358
 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 ▼ 295.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236673
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 58 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Virginia Aveni
 Full Name (Last, First, Middle Initial)
 Mailing Address 1600 clubside road
 City Lyndhurst State OH Zip Code 44124
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239327
 Amount of Each Receipt this Period
 200.00

B. Dr. W. Kirk Avery
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 411 Mail
 City Bridgewater State MA Zip Code 02324
 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 ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : 4238354
 Amount of Each Receipt this Period
 38.00

C. Ms. Jane A. Axelrad
 Full Name (Last, First, Middle Initial)
 Mailing Address 4417 Ridge Street
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Us Fda Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232801
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	83.00
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 59 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jane A. Axelrad		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2014
Mailing Address 4417 Ridge Street		Transaction ID : 4240941
City Chevy Chase	State MD	Zip Code 20815
FEC ID number of contributing federal political committee.	C	
Name of Employer Us Fda	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	
		Amount of Each Receipt this Period 25.00

Full Name (Last, First, Middle Initial) B. Ms. Jane A. Axelrad		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014
Mailing Address 4417 Ridge Street		Transaction ID : 4244773
City Chevy Chase	State MD	Zip Code 20815
FEC ID number of contributing federal political committee.	C	
Name of Employer Us Fda	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	
		Amount of Each Receipt this Period 25.00

Full Name (Last, First, Middle Initial) C. Jeffrey Axelrod		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014
Mailing Address 658 Commonwealth Ave		Transaction ID : 4229686
City Newton	State MA	Zip Code 02459
FEC ID number of contributing federal political committee.	C	
Name of Employer Raytheon Company	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
		Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 60 OF 2648
	<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)
EMILY's List

A. Mr. Paul Ayers
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 161524

City Ft Worth	State TX	Zip Code 76161
------------------	-------------	-------------------

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

Name of Employer American Train Dispatchers Association	Occupation Union Representative
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	19	/	2014

Transaction ID : 4238381

Amount of Each Receipt this Period

15.00

B. William Babula
Full Name (Last, First, Middle Initial)
Mailing Address 317 Schiappino St

City Santa Rosa	State CA	Zip Code 95409
--------------------	-------------	-------------------

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 ▼ **1035.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	16	/	2014

Transaction ID : 4236983

Amount of Each Receipt this Period

50.00

C. William Babula
Full Name (Last, First, Middle Initial)
Mailing Address 317 Schiappino St

City Santa Rosa	State CA	Zip Code 95409
--------------------	-------------	-------------------

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 ▼ **1035.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	29	/	2014

Transaction ID : 4242440

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 61 OF 2648
(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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Linda Baccei

Mailing Address 366 Godfrey Rd

City Fairlee State VT Zip Code 05045

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

Name of Employer Occupation
None Retired

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
12 / 23 / 2014
Transaction ID : 4239568

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Andrea Backlund

Mailing Address P.O. Box 82349

City Fairbanks State AK Zip Code 99708

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

Name of Employer Occupation
None 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
11 / 28 / 2014
Transaction ID : 4228461

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Ms. Andrea Backlund

Mailing Address P.O. Box 82349

City Fairbanks State AK Zip Code 99708

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

Name of Employer Occupation
None 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
12 / 28 / 2014
Transaction ID : 4241687

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

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 62 OF 2648
	<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)
EMILY's List

A. Ms. Andrea Backlund
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 82349

City Fairbanks	State AK	Zip Code 99708
-------------------	-------------	-------------------

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 ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	10	/	2014

Transaction ID : 4234426

Amount of Each Receipt this Period

15.00

B. Ms. Andrea Backlund
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 82349

City Fairbanks	State AK	Zip Code 99708
-------------------	-------------	-------------------

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 ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	19	/	2014

Transaction ID : 4238383

Amount of Each Receipt this Period

15.00

C. Ms. Laura J. Baden
Full Name (Last, First, Middle Initial)

Mailing Address 1120 Fern St.

City Ashland	State OR	Zip Code 97520
-----------------	-------------	-------------------

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

Name of Employer None	Occupation Volunteer Instructor, Olli Program, So
--------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
685.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	26	/	2014

Transaction ID : 4227807

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 63 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lorena Bader		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237777
Mailing Address 6463 W. Victoria Ln		Amount of Each Receipt this Period 20.00
City Chandler	State AZ	Zip Code 85226
FEC ID number of contributing federal political committee.	C	
Name of Employer Tuhsd	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

Full Name (Last, First, Middle Initial) B. Mrs. Shirley Baer		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236543
Mailing Address 6621 S.E. Harbor Cir.		Amount of Each Receipt this Period 200.00
City Stuart	State FL	Zip Code 34996
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 ▼ 700.00	

Full Name (Last, First, Middle Initial) C. Ms. Marlene Griffith Bagdikian		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238384
Mailing Address 25 Stonewall Road		Amount of Each Receipt this Period 25.00
City Berkeley	State CA	Zip Code 94705
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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	245.00
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 64 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Michael L. Baginski		Date of Receipt
Mailing Address 9400 W Wilbur Ave		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Milwaukee	WI	53228
FEC ID number of contributing federal political committee.		Transaction ID : 4234654
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="480.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Eloise Bahrmasel		Date of Receipt
Mailing Address 2142 W Warner Ave Apt 1		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chicago	IL	60618
FEC ID number of contributing federal political committee.		Transaction ID : 4231756
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
City of Chicago	Mayor	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Barbara Bailar		Date of Receipt
Mailing Address 10450 Lottsford Rd., Apt. 5011		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bowie	MD	20721
FEC ID number of contributing federal political committee.		Transaction ID : 4234797
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="113.00"/>
Name of Employer	Occupation	
Requested	Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="288.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="188.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 65 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda J. Bailey		Date of Receipt
Mailing Address PO Box 878		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4237133
Morongo Valley	CA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="25.00"/>
	92256	
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="255.16"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Suzanne Bailey		Date of Receipt
Mailing Address 9 Sunrise Avenue		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4239706
Ormond Beach	FL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="20.00"/>
	32176	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Robert Bailey		Date of Receipt
Mailing Address 424 Little Lake Dr Apt 13		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4240947
Ann Arbor	MI	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="200.00"/>
	48103	
Name of Employer	Occupation	
Self	Chemist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="245.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 66 OF 2648
	<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)
EMILY's List

A. Ms. Linda L. Bain
Full Name (Last, First, Middle Initial)
Mailing Address 1885 Maricopa Hwy#22

City Ojai	State CA	Zip Code 93023
--------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228465

Amount of Each Receipt this Period

25.00

B. Ms. Linda L. Bain
Full Name (Last, First, Middle Initial)
Mailing Address 1885 Maricopa Hwy#22

City Ojai	State CA	Zip Code 93023
--------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241391

Amount of Each Receipt this Period

25.00

C. Katherine Baird
Full Name (Last, First, Middle Initial)
Mailing Address 1019 Bella Vista Ave.

City Oakland	State CA	Zip Code 94610
-----------------	-------------	-------------------

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

Name of Employer Holy Names University	Occupation Community Music School Director
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228466

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 67 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Katherine Baird

Mailing Address 1019 Bella Vista Ave.

City State Zip Code
Oakland CA 94610

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

Name of Employer Occupation
Holy Names University Community Music School Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241265

Amount of Each Receipt this Period
200.00

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

Mailing Address 2240 Shelter Island Drive

City State Zip Code
San Diego CA 92106

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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238385

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Ms. Eileen Baker

Mailing Address 100 York Street, Apt. 12-O

City State Zip Code
New Haven CT 06511

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 ▼
460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236863

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00

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 68 OF 2648
	<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)
EMILY's List

A. Mr. David Baker
Full Name (Last, First, Middle Initial)
Mailing Address 1197 Roesville Rd
City Felton State DE Zip Code 19943
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 505.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4230089
Amount of Each Receipt this Period 20.00

B. Mr. David Baker
Full Name (Last, First, Middle Initial)
Mailing Address 1197 Roesville Rd
City Felton State DE Zip Code 19943
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 505.00

Date of Receipt 12 / 26 / 2014
Transaction ID : 4240719
Amount of Each Receipt this Period 20.00

C. Ms. Deanna M. Baker
Full Name (Last, First, Middle Initial)
Mailing Address 4369 Altamirano Way
City San Diego State CA Zip Code 92103
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 12 / 2014
Transaction ID : 4237024
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 69 OF 2648
	<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)
EMILY's List

A. Mr. Glenn E. Baker
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 13

City Ashville State PA Zip Code 16613

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
 M M / D D / Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4227561

Amount of Each Receipt this Period
 75.00

B. Ms. Carol Ann Baker
Full Name (Last, First, Middle Initial)

Mailing Address 983 The Alameda

City Half Moon Bay State CA Zip Code 94019

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 ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : 4230279

Amount of Each Receipt this Period
 100.00

C. Mr. Gerald R. Bakker
Full Name (Last, First, Middle Initial)

Mailing Address 12785 Wilderness Trl

City Grand Haven State MI Zip Code 49417

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 ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2014

Transaction ID : 4239156

Amount of Each Receipt this Period
 5.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00

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 70 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Gerald R. Bakker
Full Name (Last, First, Middle Initial)

Mailing Address 12785 Wilderness Trl

City Grand Haven State MI Zip Code 49417

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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4236837

Amount of Each Receipt this Period
 10.00

B. Mr. Dewitt Baldwin
Full Name (Last, First, Middle Initial)

Mailing Address 1550 N. Lake Shore Drive, Apt 18g

City Chicago State IL Zip Code 60610

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

Name of Employer Acgme Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : 4238387

Amount of Each Receipt this Period
 100.00

C. Mr. Lawrence C. Baldwin
Full Name (Last, First, Middle Initial)

Mailing Address 13708 Leland Road

City Centreville State VA Zip Code 20120

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4228467

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00

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 71 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Lawrence C. Baldwin
 Full Name (Last, First, Middle Initial)
 Mailing Address 13708 Leland Road
 City State Zip Code
 Centreville VA 20120
 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 ▼
 610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241392
 Amount of Each Receipt this Period
 300.00

B. Ms. Linda Baldwin
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 Park Ave Apt 4d
 City State Zip Code
 New York NY 10016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 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
 12 / 17 / 2014
Transaction ID : 4237429
 Amount of Each Receipt this Period
 150.00

C. Ms. Joan Poms Balfour
 Full Name (Last, First, Middle Initial)
 Mailing Address 6249 Copper Lake Ct
 City State Zip Code
 Boynton Beach FL 33437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 24 / 2014
Transaction ID : 4240256
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00
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 72 OF 2648
	(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)
EMILY's List

A. Ms. Andrea C. Ball
Full Name (Last, First, Middle Initial)
Mailing Address 1520 15th St Apt 8

City Sacramento	State CA	Zip Code 95814
FEC ID number of contributing federal political committee. C		
Name of Employer Ca School Boards Association	Occupation Legislative Advocate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233359

Amount of Each Receipt this Period
50.00

B. Laurel Ballou
Full Name (Last, First, Middle Initial)
Mailing Address 12116 38th Ave SE

City Everett	State WA	Zip Code 98208
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 ▼ 350.00	

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233457

Amount of Each Receipt this Period
50.00

C. Ms. Sandra J. Ball-Rokeach
Full Name (Last, First, Middle Initial)
Mailing Address 2832 Medill Pl.

City Los Angeles	State CA	Zip Code 90064
FEC ID number of contributing federal political committee. C		
Name of Employer Univ of So. Cal	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
12 / 10 / 2014
Transaction ID : 4234323

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 73 OF 2648
	<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)
EMILY's List

A. Alex Bally
Full Name (Last, First, Middle Initial)
Mailing Address 29 Wheeler Rd
City Marstons Mills State MA Zip Code 02648
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Designer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 917.17

Date of Receipt 11 / 27 / 2014
Transaction ID : 4228360
Amount of Each Receipt this Period 26.00

B. Alex Bally
Full Name (Last, First, Middle Initial)
Mailing Address 29 Wheeler Rd
City Marstons Mills State MA Zip Code 02648
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Designer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 917.17

Date of Receipt 12 / 27 / 2014
Transaction ID : 4241192
Amount of Each Receipt this Period 26.00

C. Benjamin Bamford
Full Name (Last, First, Middle Initial)
Mailing Address 1232 Morgan Bay Road
City Blue Hill State ME Zip Code 04614
FEC ID number of contributing federal political committee. **C**
Name of Employer Spectrum Medical Group Occupation Radiologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4231656
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.00
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 74 OF 2648
	<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)
EMILY's List

A. Juliana Bancroft
Full Name (Last, First, Middle Initial)
Mailing Address 523 Dalehurst Avenue
City Los Angeles State CA Zip Code 90024
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 18 / 2014
Transaction ID : 4238126
Amount of Each Receipt this Period 250.00

B. Mr. William Bandes
Full Name (Last, First, Middle Initial)
Mailing Address 2300 Tuscany St.
City Roseville State CA Zip Code 95661
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 ▼ 373.00

Date of Receipt 12 / 05 / 2014
Transaction ID : 4232729
Amount of Each Receipt this Period 25.00

C. Ms. Maggie K. Banducci
Full Name (Last, First, Middle Initial)
Mailing Address 1742 Hyland St.
City Bayside State CA Zip Code 95524
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 385.00

Date of Receipt 12 / 10 / 2014
Transaction ID : 4234533
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 75 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Terrylyn Bankes			Date of Receipt 12 / 29 / 2014 Transaction ID : 4242523
Mailing Address PO Box 7498			Amount of Each Receipt this Period 225.00
City Sarasota	State FL	Zip Code 34278	
FEC ID number of contributing federal political committee. C			
Name of Employer Sarasota Anestheisolgist Pa	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

Full Name (Last, First, Middle Initial) B. Elizabeth Banks			Date of Receipt 12 / 31 / 2014 Transaction ID : 4243428
Mailing Address 26893 Bouquet Canyon Road Ste C210			Amount of Each Receipt this Period 500.00
City Santa Clarita	State CA	Zip Code 91350	
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Actress/Producer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Donna Lee Barata			Date of Receipt 12 / 17 / 2014 Transaction ID : 4237727
Mailing Address 4443 Opana Pl			Amount of Each Receipt this Period 15.00
City Haiku	State HI	Zip Code 96708	
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation None		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional).....▶	740.00
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 76 OF 2648
	<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)
EMILY's List

A. Mr. Ralph Barbee
Full Name (Last, First, Middle Initial)

Mailing Address 16309 Orchard Bend Road

City Poway State CA Zip Code 92064

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

Name of Employer Self Occupation Computer Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4236719

Amount of Each Receipt this Period
 30.00

B. Mr. Patrick J. Barbush
Full Name (Last, First, Middle Initial)

Mailing Address 2611 Taft Court

City Fullerton State CA Zip Code 92835

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 ▼ **290.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014

Transaction ID : 4235442

Amount of Each Receipt this Period
 25.00

C. Mr. Anthony Barcellos
Full Name (Last, First, Middle Initial)

Mailing Address 3009 Lillard Drive

City Davis State CA Zip Code 95618

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

Name of Employer American River College Occupation College Professor

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
 12 / 16 / 2014

Transaction ID : 4237123

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **80.00**

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 77 OF 2648
	<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)
EMILY's List

A. Ms. Geraldine Barclay
Full Name (Last, First, Middle Initial)
Mailing Address 32241 Southfield Road
City Beverly Hills State MI Zip Code 48025
FEC ID number of contributing federal political committee. **C**
Name of Employer Fitz Public Schls Occupation Bilingual Coordinator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 30 / 2014
Transaction ID : 4243122
Amount of Each Receipt this Period 150.00

B. Ms. Frances L. Bard
Full Name (Last, First, Middle Initial)
Mailing Address 232 Hartnell Pl.
City Sacramento State CA Zip Code 95825
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 ▼ 275.00

Date of Receipt 12 / 05 / 2014
Transaction ID : 4232370
Amount of Each Receipt this Period 75.00

C. Ms. Kathryn Bardwell
Full Name (Last, First, Middle Initial)
Mailing Address 562 Canyon Point RD
City Las Cruces State NM Zip Code 88011
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 ▼ 450.00

Date of Receipt 12 / 01 / 2014
Transaction ID : 4230920
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
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 78 OF 2648
	<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)
EMILY's List

A. Ms. Linda A. Barger
 Full Name (Last, First, Middle Initial)
 Mailing Address 4645 Goodheart Ct.
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232328
 Amount of Each Receipt this Period
 100.00

B. Keston Barker
 Full Name (Last, First, Middle Initial)
 Mailing Address 33542 Valle Rd.
 City San Juan Capistrano State CA Zip Code 92675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Choice Real Estate Occupation Real Estate Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232500
 Amount of Each Receipt this Period
 20.00

C. M. Coleen Barker
 Full Name (Last, First, Middle Initial)
 Mailing Address 33542 Valle Rd
 City San Juan Capistrano State CA Zip Code 92675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Elite One Mortgage Occupation Loan Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235747
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 79 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Shauna Barkley		Date of Receipt
Mailing Address 4240 E. Clarendon Ave		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City State Zip Code Phoenix AZ 85018		Transaction ID : 4232088
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Requested Occupation Requested Engineer		<input type="text" value="41.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="567.00"/>

Full Name (Last, First, Middle Initial) B. Mrs. June M. Barnebey		Date of Receipt
Mailing Address 4612 Penbrook Ct.		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City State Zip Code Plano TX 75024		Transaction ID : 4230283
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Requested Occupation Requested Requested		<input type="text" value="150.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="300.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Pamela M. Barnes		Date of Receipt
Mailing Address 50 Woodside Road #212		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City State Zip Code Redwood City CA 94061		Transaction ID : 4238390
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Requested Occupation Self Tax Consultant		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="260.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="216.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 80 OF 2648
	<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)
EMILY's List

A. Admiral James Barnett Jr
Full Name (Last, First, Middle Initial)

Mailing Address 2406 S Arlington Ridge Road

City Arlington	State VA	Zip Code 22202
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FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236568

Amount of Each Receipt this Period
83.00

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

Mailing Address 619 Newsom

City Lufkin	State TX	Zip Code 75904
----------------	-------------	-------------------

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

Name of Employer Requested	Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00

Date of Receipt
12 / 09 / 2014
Transaction ID : 4233901

Amount of Each Receipt this Period
30.00

C. Alicia W. Barney
Full Name (Last, First, Middle Initial)

Mailing Address 421 E Live Oak Street #103

City San Gabriel	State CA	Zip Code 91776
---------------------	-------------	-------------------

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

Name of Employer Requested None	Occupation Requested None
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.00

Date of Receipt
11 / 28 / 2014
Transaction ID : 4228474

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	123.00
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 81 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Alicia W. Barney		Date of Receipt
Mailing Address 421 E Live Oak Street #103		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City San Gabriel	State CA	Zip Code 91776
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4241865
Name of Employer None	Occupation None	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
	<input type="text" value="555.00"/>	

Full Name (Last, First, Middle Initial) B. Alicia W. Barney		Date of Receipt
Mailing Address 421 E Live Oak Street #103		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City San Gabriel	State CA	Zip Code 91776
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4235774
Name of Employer None	Occupation None	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="35.00"/>
	<input type="text" value="555.00"/>	

Full Name (Last, First, Middle Initial) C. Diana Barnhart		Date of Receipt
Mailing Address 447 Stephens Dr		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City Brentwood	State CA	Zip Code 94513
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4232622
Name of Employer None	Occupation None	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="25.00"/>
	<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 82 OF 2648
	<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)
EMILY's List

A. Marilyn Barrett
Full Name (Last, First, Middle Initial)
Mailing Address 80 N Warren St #8
City Woburn State MA Zip Code 01801
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
12 / 26 / 2014
Transaction ID : 4240768
Amount of Each Receipt this Period
250.00

B. Ms. Cathy D. Barrett
Full Name (Last, First, Middle Initial)
Mailing Address 526 Wood St Apt 408
City Bethlehem State PA Zip Code 18018
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233280
Amount of Each Receipt this Period
100.00

C. Ms. Beverly J. Barron
Full Name (Last, First, Middle Initial)
Mailing Address 710 S Hanley Rd #17C
City Saint Louis State MO Zip Code 63105
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt
12 / 24 / 2014
Transaction ID : 4240274
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... **225.00**
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 83 OF 2648
	<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)
EMILY's List

A. Inger Barron
Full Name (Last, First, Middle Initial)
Mailing Address 430 College Avenue
City Boulder State CO Zip Code 80302
FEC ID number of contributing federal political committee. **C**
Name of Employer Ucar Occupation Administrative Assistant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 17 / 2014
Transaction ID : 4237754
Amount of Each Receipt this Period 30.00

B. Ms. Geraldine Barrow
Full Name (Last, First, Middle Initial)
Mailing Address 11705 141st Street
City Jamaica State NY Zip Code 11436
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 ▼ 248.00

Date of Receipt 12 / 19 / 2014
Transaction ID : 4238391
Amount of Each Receipt this Period 15.00

C. Ms. Molly K. Barry
Full Name (Last, First, Middle Initial)
Mailing Address 17132 29 Dr. SE
City Bothell State WA Zip Code 98012
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 775.00

Date of Receipt 11 / 28 / 2014
Transaction ID : 4228476
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 84 OF 2648
	<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)
EMILY's List

A. Ms. Molly K. Barry
Full Name (Last, First, Middle Initial)
Mailing Address 17132 29 Dr. SE

City Bothell	State WA	Zip Code 98012
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241867

Amount of Each Receipt this Period
50.00

B. Ms. Barbara B Barry
Full Name (Last, First, Middle Initial)
Mailing Address POB 412

City Taftsville	State VT	Zip Code 05073
--------------------	-------------	-------------------

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

Name of Employer Self	Occupation Innkeeper
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4230187

Amount of Each Receipt this Period
100.00

C. Ms. Barbara B Barry
Full Name (Last, First, Middle Initial)
Mailing Address POB 412

City Taftsville	State VT	Zip Code 05073
--------------------	-------------	-------------------

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

Name of Employer Self	Occupation Innkeeper
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240859

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 85 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Eric Bartleson
Full Name (Last, First, Middle Initial)

Mailing Address 1393 Brookview Drive

City Winona State MN Zip Code 55987

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

Name of Employer Capella University Occupation Part Time Faculty

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2014
Transaction ID : 4238185

Amount of Each Receipt this Period
35.00

B. Mr. Eric Bartleson
Full Name (Last, First, Middle Initial)

Mailing Address 1393 Brookview Drive

City Winona State MN Zip Code 55987

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

Name of Employer Capella University Occupation Part Time Faculty

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231745

Amount of Each Receipt this Period
50.00

C. Mr. Eric Bartleson
Full Name (Last, First, Middle Initial)

Mailing Address 1393 Brookview Drive

City Winona State MN Zip Code 55987

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

Name of Employer Capella University Occupation Part Time Faculty

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243315

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 86 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Joanne Bartlett
 Full Name (Last, First, Middle Initial)
 Mailing Address 172 Cottage Street
 City Natick State MA Zip Code 01760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228478
 Amount of Each Receipt this Period
 25.00

B. Joanne Bartlett
 Full Name (Last, First, Middle Initial)
 Mailing Address 172 Cottage Street
 City Natick State MA Zip Code 01760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241394
 Amount of Each Receipt this Period
 25.00

C. Ms. Donna Bahry Bartlett
 Full Name (Last, First, Middle Initial)
 Mailing Address 628 Fairway Road
 City State College State PA Zip Code 16803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Penn State University Occupation PROFESSOR
 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 / 25 / 2014
Transaction ID : 4227464
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 87 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Elizabeth Bartlett		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233277
Mailing Address 5066 47th St W		Amount of Each Receipt this Period 500.00
City Bradenton	State FL	Zip Code 34210
FEC ID number of contributing federal political committee. C	Name of Employer Requested	Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Ms. Cynthia Barton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234082
Mailing Address 536 Weston Dr.		Amount of Each Receipt this Period 50.00
City Campbell	State CA	Zip Code 95008
FEC ID number of contributing federal political committee. C	Name of Employer McClatchy Interactive	Occupation National Online Ad Trafficker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Patricia Barton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239680
Mailing Address P.O. Box 267		Amount of Each Receipt this Period 75.00
City Bollinas	State CA	Zip Code 94924
FEC ID number of contributing federal political committee. C	Name of Employer Self	Occupation Artist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

SUBTOTAL of Receipts This Page (optional).....▶	625.00
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 88 OF 2648
	<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)
EMILY's List

A. Paulette Barwinkel
 Full Name (Last, First, Middle Initial)
 Mailing Address 4701 Palisade Drive
 City Austin State TX Zip Code 78731
 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 ▼ 300.00

Date of Receipt
 12 / 10 / 2014
Transaction ID : 4234569
 Amount of Each Receipt this Period
 25.00

B. Mrs. Patricia M Bass
 Full Name (Last, First, Middle Initial)
 Mailing Address 5021 Vannoy Avenue
 City Castro Valley State CA Zip Code 94546
 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 ▼ 435.00

Date of Receipt
 12 / 05 / 2014
Transaction ID : 4232869
 Amount of Each Receipt this Period
 40.00

C. Sarbani Basu
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 Davis Street
 City Hamden State CT Zip Code 06517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yale University Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 12 / 05 / 2014
Transaction ID : 4232881
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 89 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Eloise Bates
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 Tiffany Avenue
 City San Francisco State CA Zip Code 94110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236630
 Amount of Each Receipt this Period
 10.00

B. Eloise Bates
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 Tiffany Avenue
 City San Francisco State CA Zip Code 94110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 12 / 11 / 2014
Transaction ID : 4234938
 Amount of Each Receipt this Period
 35.00

C. Ms. Janet H. Bates
 Full Name (Last, First, Middle Initial)
 Mailing Address 4501 Woodfair Way
 City Carmichael State CA Zip Code 95608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 12 / 01 / 2014
Transaction ID : 4230287
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 195.00
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 90 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Margaret Batko		Date of Receipt
Mailing Address 1107 N. Chambliss Street		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City Alexandria	State VA	Zip Code 22312
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4234193
Name of Employer Usda		Amount of Each Receipt this Period
Occupation Federal Government Program Analyst		<input type="text" value="500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="600.00"/>		

Full Name (Last, First, Middle Initial) B. Ms. Ann Batman		Date of Receipt
Mailing Address 50 Elizabeth Circle		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Greenbrae	State CA	Zip Code 94904
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4228483
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="325.00"/>		

Full Name (Last, First, Middle Initial) C. Ms. Ann Batman		Date of Receipt
Mailing Address 50 Elizabeth Circle		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Greenbrae	State CA	Zip Code 94904
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4241688
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="325.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 91 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. William Battin
Full Name (Last, First, Middle Initial)

Mailing Address 156 Fairlawn Ave.

City Albany	State NY	Zip Code 12203
----------------	-------------	-------------------

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 ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228484

Amount of Each Receipt this Period

15.00

B. Mr. William Battin
Full Name (Last, First, Middle Initial)

Mailing Address 156 Fairlawn Ave.

City Albany	State NY	Zip Code 12203
----------------	-------------	-------------------

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 ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241870

Amount of Each Receipt this Period

15.00

C. Ms. Suzanne Baugh
Full Name (Last, First, Middle Initial)

Mailing Address 4728 116th Ave SE

City Bellevue	State WA	Zip Code 98006
------------------	-------------	-------------------

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

Name of Employer Wright Runstael & Co.	Occupation Leasing Manager
---	-------------------------------

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
12	/	12	/	2014

Transaction ID : 4235209

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 92 OF 2648
	<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)
EMILY's List

A. Mr. Stephen R. Baum
Full Name (Last, First, Middle Initial)

Mailing Address 111 Newell Avenue

City Needham State MA Zip Code 02492

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

Name of Employer Kurzweil Educational Systems Occupation Software Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : 4230086

Amount of Each Receipt this Period
25.00

B. Mr. Stephen R. Baum
Full Name (Last, First, Middle Initial)

Mailing Address 111 Newell Avenue

City Needham State MA Zip Code 02492

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

Name of Employer Kurzweil Educational Systems Occupation Software Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014

Transaction ID : 4239712

Amount of Each Receipt this Period
25.00

C. M. Carolyn Baum
Full Name (Last, First, Middle Initial)

Mailing Address 701 S Skinker Blvd Apt 204

City Saint Louis State MO Zip Code 63105

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

Name of Employer Washington Univerisity Occupation Professor

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
12 / 28 / 2014

Transaction ID : 4241872

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 93 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Charles W. Baumann		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228486
Mailing Address 949 S. Batavia Ave.		Amount of Each Receipt this Period 10.00
City Geneva	State IL	Zip Code 60134
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Full Name (Last, First, Middle Initial) B. Charles W. Baumann		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241873
Mailing Address 949 S. Batavia Ave.		Amount of Each Receipt this Period 10.00
City Geneva	State IL	Zip Code 60134
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Full Name (Last, First, Middle Initial) C. Virginia Baumann		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234410
Mailing Address 949 S. Batavia Ave.		Amount of Each Receipt this Period 15.00
City Geneva	State IL	Zip Code 60134
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional).....▶	35.00
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 94 OF 2648
	<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)
EMILY's List

A. Ms. Charlene Baur
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 146

City Bay Port State MI Zip Code 48720

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **265.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2014

Transaction ID : 4236213

Amount of Each Receipt this Period
200.00

B. Mrs. Kathleen J. Bavelas
Full Name (Last, First, Middle Initial)

Mailing Address 56 Pratt Lane

City Wolcott State CT Zip Code 06716

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : 4244774

Amount of Each Receipt this Period
15.00

C. Ms. Barbara S. Bayless
Full Name (Last, First, Middle Initial)

Mailing Address 175 Cape May Dr Ste 203

City Wilmington State OH Zip Code 45177

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 ▼ **2750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 4228488

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **135.00**

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 95 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Barbara S. Bayless
 Full Name (Last, First, Middle Initial)
 Mailing Address 175 Cape May Dr Ste 203
 City State Zip Code
 Wilmington OH 45177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241689
 Amount of Each Receipt this Period
 100.00

B. Mrs. Barbara H. Bayley
 Full Name (Last, First, Middle Initial)
 Mailing Address 3643 Tamarack Lane
 City State Zip Code
 Eau Claire WI 54701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Requested Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236214
 Amount of Each Receipt this Period
 10.00

C. Sheila Bayne
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Whitcomb Street
 City State Zip Code
 Belmont MA 02478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Tufts University University Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 645.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233477
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 96 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Kathleen Woerner Beagle

Mailing Address 23 Kirkwood Circle

City State Zip Code
Brigantine NJ 08203

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 / /
 12 / 02 / 2014
Transaction ID : 4233976

Amount of Each Receipt this Period
 20.00

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

Mailing Address 15 Sunset Drive

City State Zip Code
Pleasant Hill CA 94523

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

Name of Employer Occupation
Self Consultant - Data Mining

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt
 / /
 11 / 25 / 2014
Transaction ID : 4230159

Amount of Each Receipt this Period
 42.00

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

Mailing Address 15 Sunset Drive

City State Zip Code
Pleasant Hill CA 94523

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

Name of Employer Occupation
Self Consultant - Data Mining

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt
 / /
 12 / 23 / 2014
Transaction ID : 4239713

Amount of Each Receipt this Period
 42.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 104.00

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 97 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Trudi Beaman-Martinez
 Full Name (Last, First, Middle Initial)
 Mailing Address 1143 Lake Hortonia Rd
 City State Zip Code
 Sudbury VT 05733
 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 ▼
 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234463
 Amount of Each Receipt this Period
 25.00

B. Ms. Peg Bean
 Full Name (Last, First, Middle Initial)
 Mailing Address 812 Lexington Cross Drive
 City State Zip Code
 Las Vegas NV 89144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 720.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228489
 Amount of Each Receipt this Period
 60.00

c. Ms. Peg Bean
 Full Name (Last, First, Middle Initial)
 Mailing Address 812 Lexington Cross Drive
 City State Zip Code
 Las Vegas NV 89144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 720.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241875
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
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 98 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Diane Reimer Bean
Full Name (Last, First, Middle Initial)

Mailing Address 6709 Buttermere Lane

City Bethesda State MD Zip Code 20817

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

Name of Employer Us Dept. Of State Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2014

Transaction ID : 4229626

Amount of Each Receipt this Period
100.00

B. Diane Reimer Bean
Full Name (Last, First, Middle Initial)

Mailing Address 6709 Buttermere Lane

City Bethesda State MD Zip Code 20817

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

Name of Employer Us Dept. Of State Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014

Transaction ID : 4241228

Amount of Each Receipt this Period
100.00

C. Norman L. Bearrentine
Full Name (Last, First, Middle Initial)

Mailing Address 395 Van Buren Ave. Apt. 304

City Oakland State CA Zip Code 94610

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 ▼ **285.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : 4230120

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	230.00
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 99 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
EMILY's List

A. Nancy L. Beattie
 Full Name (Last, First, Middle Initial)
 Mailing Address 2610 San Clemente Terrace
 City San Diego State CA Zip Code 92122
 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 ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236685
 Amount of Each Receipt this Period
 15.00

B. Kathleen Beaver
 Full Name (Last, First, Middle Initial)
 Mailing Address 286 Saint James Place
 City Philadelphia State PA Zip Code 19106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vamc Philadelphia Occupation Physician
 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
 12 / 31 / 2014
Transaction ID : 4243240
 Amount of Each Receipt this Period
 250.00

C. Mr. James M. Beck
 Full Name (Last, First, Middle Initial)
 Mailing Address 4714 Windsor Ave.
 City Philadelphia State PA Zip Code 19143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Reed Smith Llp Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : 4232179
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	465.00
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 100 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patricia C Becker
 Full Name (Last, First, Middle Initial)
 Mailing Address 28962 Walnut Grove
 City Southfield State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Apb Associates Occupation Demographer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237784
 Amount of Each Receipt this Period
 200.00

B. Dr. Carol Becker
 Full Name (Last, First, Middle Initial)
 Mailing Address 14257 Roblar Place
 City Sherman Oaks State CA Zip Code 91423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243262
 Amount of Each Receipt this Period
 300.00

C. Mr. William G. Becker
 Full Name (Last, First, Middle Initial)
 Mailing Address 43815 Oak Leaf Trail
 City Three Rivers State CA Zip Code 93271
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238396
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 345.00
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 101 OF 2648
	<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)
EMILY's List

A. Dr. Judith Becker
Full Name (Last, First, Middle Initial)
Mailing Address 2165 Newport Road
City Ann Arbor State MI Zip Code 48103
FEC ID number of contributing federal political committee. **C**
Name of Employer U of MI Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 08 / 2014
Transaction ID : 4233232
Amount of Each Receipt this Period 100.00

B. Rebecca Becker-Bean
Full Name (Last, First, Middle Initial)
Mailing Address 221 Weeping Cherry Lane
City Columbia State SC Zip Code 29212
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Disabled
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 335.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4235081
Amount of Each Receipt this Period 10.00

C. Ms. Marjorie Becker-Lewin
Full Name (Last, First, Middle Initial)
Mailing Address 25 W 81st Street, Apt 6-A
City New York State NY Zip Code 10024
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Occupational Therapist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 17 / 2014
Transaction ID : 4237521
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional).....▶ 360.00
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 102 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Susan Beckerman
Full Name (Last, First, Middle Initial)
Mailing Address 685 West End Avenue, Apt. 9C

City New York	State NY	Zip Code 10025
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2014

Transaction ID : 4244890

Amount of Each Receipt this Period
225.00

B. Peggy Beckman
Full Name (Last, First, Middle Initial)
Mailing Address 195 E. Dovetail Dr.

City Coralville	State IA	Zip Code 52241
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2014

Transaction ID : 4237257

Amount of Each Receipt this Period
100.00

C. Ms. Renee Beddouk
Full Name (Last, First, Middle Initial)
Mailing Address 7519 Twin Eagle Ln.

City Fort Myers	State FL	Zip Code 33912
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2014

Transaction ID : 4242838

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional).....▶	360.00
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 103 OF 2648
	<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)
EMILY's List

A. Dr. Joan M. Bedinghaus
Full Name (Last, First, Middle Initial)
Mailing Address 3061 N Marietta Ave

City Milwaukee	State WI	Zip Code 53211
-------------------	-------------	-------------------

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

Name of Employer Medical College Of Wisconsin	Occupation Physician
--	-------------------------

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
11	/	28	/	2014

Transaction ID : 4228492

Amount of Each Receipt this Period

25.00

B. Dr. Joan M. Bedinghaus
Full Name (Last, First, Middle Initial)
Mailing Address 3061 N Marietta Ave

City Milwaukee	State WI	Zip Code 53211
-------------------	-------------	-------------------

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

Name of Employer Medical College Of Wisconsin	Occupation Physician
--	-------------------------

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
12	/	15	/	2014

Transaction ID : 4236709

Amount of Each Receipt this Period

25.00

C. Dr. Joan M. Bedinghaus
Full Name (Last, First, Middle Initial)
Mailing Address 3061 N Marietta Ave

City Milwaukee	State WI	Zip Code 53211
-------------------	-------------	-------------------

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

Name of Employer Medical College Of Wisconsin	Occupation Physician
--	-------------------------

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
12	/	28	/	2014

Transaction ID : 4241628

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 104 OF 2648
	<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)
EMILY's List

A. Nancy Bednar
Full Name (Last, First, Middle Initial)
Mailing Address 1816 West Avenue H4
City Lancaster State CA Zip Code 93534
FEC ID number of contributing federal political committee. **C**
Name of Employer Antelope Valley College Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 09 / 2014
Transaction ID : 4234096
Amount of Each Receipt this Period 15.00

B. Nancy Bednar
Full Name (Last, First, Middle Initial)
Mailing Address 1816 West Avenue H4
City Lancaster State CA Zip Code 93534
FEC ID number of contributing federal political committee. **C**
Name of Employer Antelope Valley College Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 09 / 2014
Transaction ID : 4234097
Amount of Each Receipt this Period 25.00

C. Ms. Ruth Been
Full Name (Last, First, Middle Initial)
Mailing Address 333 Elmwood Ave., Apt. J204
City Maplewood State NJ Zip Code 07040
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 04 / 2014
Transaction ID : 4232209
Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00
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 105 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Alice B. Belgray

Mailing Address 450 West End Ave
13b

City New York State NY Zip Code 10024

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

Name of Employer None Occupation Editor

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
 12 / 21 / 2014
Transaction ID : 4239356

Amount of Each Receipt this Period
50.00

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

Mailing Address 803 Coxswain Way Unit 803

City Annapolis State MD Zip Code 21401

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228385

Amount of Each Receipt this Period
50.00

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

Mailing Address 803 Coxswain Way Unit 803

City Annapolis State MD Zip Code 21401

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4240989

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 106 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jay Bell
 Full Name (Last, First, Middle Initial)
 Mailing Address 19339 196th Ave. N.E.
 City Woodinville State WA Zip Code 98077
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227487
 Amount of Each Receipt this Period
 25.00

B. Mr. Herbert W. Bell
 Full Name (Last, First, Middle Initial)
 Mailing Address 332 Lakeshore Ln
 City Taylorsville State NC Zip Code 28681
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237437
 Amount of Each Receipt this Period
 50.00

C. Peggy Bell
 Full Name (Last, First, Middle Initial)
 Mailing Address 195 Dapplegray
 City Bell Canyon State CA Zip Code 91307
 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 ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228493
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 107 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Peggy Bell
 Full Name (Last, First, Middle Initial)
 Mailing Address 195 Dapplegray
 City Bell Canyon State CA Zip Code 91307
 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 ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241877
 Amount of Each Receipt this Period
 50.00

B. Ms. Janet Dewart Bell
 Full Name (Last, First, Middle Initial)
 Mailing Address 444 Central Park West Apt.. 14 B
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234981
 Amount of Each Receipt this Period
 100.00

C. Ms. Janet M. Bell
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Henry W. Dubois Dr., Apt. 17
 City New Paltz State NY Zip Code 12561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232803
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
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 108 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Deborah Belzer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1016 S Valley Rd
 City Olathe State KS Zip Code 66061
 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 ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235450
 Amount of Each Receipt this Period
 20.00

B. Ms. Randie Bencanann
 Full Name (Last, First, Middle Initial)
 Mailing Address 117 Alton Ave
 City San Francisco State CA Zip Code 94116
 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 ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233721
 Amount of Each Receipt this Period
 100.00

C. Anne Bence
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 River Terrace
 5a
 City New York State NY Zip Code 10282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cny Occupation Alj
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237114
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 109 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Mary Bendelow
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 130

City Conifer	State CO	Zip Code 80433
-----------------	-------------	-------------------

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

Name of Employer Self	Occupation Tour Director
--------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2014

Transaction ID : 4232847

Amount of Each Receipt this Period

35.00

B. Ms. Brenda Bendler
Full Name (Last, First, Middle Initial)
Mailing Address 56 Engle St.

City Tenafly	State NJ	Zip Code 07670
-----------------	-------------	-------------------

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 ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2014

Transaction ID : 4242907

Amount of Each Receipt this Period

50.00

C. Ms. Helen Bendzsa
Full Name (Last, First, Middle Initial)
Mailing Address 722 Maple Ave.

City Las Animas	State CO	Zip Code 81054
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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 ▼
211.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2014

Transaction ID : 4233873

Amount of Each Receipt this Period

38.00

SUBTOTAL of Receipts This Page (optional).....▶	123.00
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 110 OF 2648
	<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)
EMILY's List

A. Miss Maria C. Benech
Full Name (Last, First, Middle Initial)

Mailing Address 8574 French Flat Rd.

City Jamestown	State CA	Zip Code 95327
-------------------	-------------	-------------------

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

Name of Employer USDA Forest Service	Occupation Forester
---	------------------------

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
12	/	05	/	2014

Transaction ID : 4232385

Amount of Each Receipt this Period

250.00

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

Mailing Address 720 Gough Street #33

City San Francisco	State CA	Zip Code 94102
-----------------------	-------------	-------------------

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

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

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
12	/	08	/	2014

Transaction ID : 4233673

Amount of Each Receipt this Period

20.00

C. Ms. Kennette Benedict
Full Name (Last, First, Middle Initial)

Mailing Address 360 E Randolph St # 3206

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer Bulletin Of The Atomic Scientists	Occupation Publisher
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **501.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230293

Amount of Each Receipt this Period

188.00

SUBTOTAL of Receipts This Page (optional).....▶	458.00
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 111 OF 2648
	<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)
EMILY's List

A. Lauren Benedict
Full Name (Last, First, Middle Initial)
Mailing Address 360A Vista Circle
City Macon State GA Zip Code 31204
FEC ID number of contributing federal political committee. **C**
Name of Employer The Boston Law Firm Occupation Attorney
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 20 / 2014**
Transaction ID : 4244891
Amount of Each Receipt this Period **25.00**

B. Ms. Betty Bengtson
Full Name (Last, First, Middle Initial)
Mailing Address 1280 E. Paseo Pavon
City Tucson State AZ Zip Code 85718
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 **1125.00**

Date of Receipt **12 / 05 / 2014**
Transaction ID : 4232386
Amount of Each Receipt this Period **375.00**

C. Mr. Magnus B. Bennedsen
Full Name (Last, First, Middle Initial)
Mailing Address 900 E. Harrison Avenue #C32
City Pomona State CA Zip Code 91767
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 **1300.00**

Date of Receipt **12 / 15 / 2014**
Transaction ID : 4236404
Amount of Each Receipt this Period **200.00**

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: (check only one)	PAGE 112 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elizabeth Bennett		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236569
Mailing Address 2300 Krameria Street		Amount of Each Receipt this Period 133.33
City Denver	State CO	Zip Code 80207
FEC ID number of contributing federal political committee. C		
Name of Employer Africa Direct	Occupation executiver	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Cynthia F. Bennett		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2014 Transaction ID : 4240288
Mailing Address 645 Bradford Street		Amount of Each Receipt this Period 150.00
City Pasadena	State CA	Zip Code 91105
FEC ID number of contributing federal political committee. C		
Name of Employer Cynthia Bennett & Assoc Inc.	Occupation Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Cynthia Bennett		Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2014 Transaction ID : 4234897
Mailing Address 135 Wiodstream Drive		Amount of Each Receipt this Period 20.00
City Newnan	State GA	Zip Code 30265
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

SUBTOTAL of Receipts This Page (optional).....▶	303.33
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 113 OF 2648
	<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)
EMILY's List

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

Mailing Address 1550 Eligio Lane

City State Zip Code
Davis CA 95618

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 ▼
320.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2014
Transaction ID : 4242852

Amount of Each Receipt this Period
15.00

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

Mailing Address 79 West Concord Street

City State Zip Code
Boston MA 02118

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2200.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4244524

Amount of Each Receipt this Period
1200.00

C. Ms. Janice Benson
Full Name (Last, First, Middle Initial)

Mailing Address 4452 N. Francisco Avenue

City State Zip Code
Chicago IL 60625

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

Name of Employer Occupation
Northshore Univ. Health System Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2014
Transaction ID : 4231450

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1440.00

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 114 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Gladys A. Benson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3398 50th Street
 City Frederic State WI Zip Code 54837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Methodist Church Occupation Admin Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230056
 Amount of Each Receipt this Period
 15.00

B. Ms. Gladys A. Benson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3398 50th Street
 City Frederic State WI Zip Code 54837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Methodist Church Occupation Admin Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240670
 Amount of Each Receipt this Period
 15.00

C. William Ross Bentley
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 149
 329 North Granby Road
 City North Granby State CT Zip Code 06060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 11 / 28 / 2014
Transaction ID : 4228497
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00
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 115 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. William Ross Bentley		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241881
Mailing Address PO Box 149 329 North Granby Road		Amount of Each Receipt this Period 10.00
City North Granby	State CT	Zip Code 06060
FEC ID number of contributing federal political committee. C	Name of Employer None	Occupation None
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Full Name (Last, First, Middle Initial) B. William Ross Bentley		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238403
Mailing Address PO Box 149 329 North Granby Road		Amount of Each Receipt this Period 15.00
City North Granby	State CT	Zip Code 06060
FEC ID number of contributing federal political committee. C	Name of Employer None	Occupation None
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Full Name (Last, First, Middle Initial) C. Ms. Margaret Benton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234206
Mailing Address 10310 NE Beach Crest Dr		Amount of Each Receipt this Period 20.00
City Bainbridge Island	State WA	Zip Code 98110
FEC ID number of contributing federal political committee. C	Name of Employer None	Occupation None
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 116 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert P Bentz		Date of Receipt
Mailing Address 3001 Valley Brook Drive		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Champaign	IL	61822
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4229584
Name of Employer	Occupation	Amount of Each Receipt this Period
Requested	Requested	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="590.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. Robert P Bentz		Date of Receipt
Mailing Address 3001 Valley Brook Drive		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Champaign	IL	61822
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4241882
Name of Employer	Occupation	Amount of Each Receipt this Period
Requested	Requested	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="590.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Patricia J. Benz		Date of Receipt
Mailing Address 9767 Atelier Drive		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Anchorage	AK	99507
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4236571
Name of Employer	Occupation	Amount of Each Receipt this Period
Cook Inlet Tribal Council, Inc.	manager	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="310.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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 117 OF 2648
	<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)
EMILY's List

A. Ms. Carol A. Bequette
Full Name (Last, First, Middle Initial)
Mailing Address 3747 Circle Dr. W.
City Fresno State CA Zip Code 93704
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 **510.00**

Date of Receipt
12 / 11 / 2014
Transaction ID : 4234818
Amount of Each Receipt this Period
50.00

B. Ms. Barbara S. Berci
Full Name (Last, First, Middle Initial)
Mailing Address 1545 S Beverly Drive
City Los Angeles State CA Zip Code 90035
FEC ID number of contributing federal political committee. **C**
Name of Employer Bsc Management, Inc Occupation Small Business Owner
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **400.00**

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234050
Amount of Each Receipt this Period
100.00

C. Carol Berendsen
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 927 (New)
City Diablo State CA Zip Code 94528
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 **320.00**

Date of Receipt
12 / 22 / 2014
Transaction ID : 4239439
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... **165.00**
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 118 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Carol Berendsen
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 927 (New)
 City Diablo State CA Zip Code 94528
 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 ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243266
 Amount of Each Receipt this Period
 50.00

B. Ms. Cynthia Berenson
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 Boylston Street
 City Boston State MA Zip Code 02116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234837
 Amount of Each Receipt this Period
 300.00

C. Philip Berent
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 N Dee Rd Unit 1 H
 City Park Ridge State IL Zip Code 60068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233694
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 119 OF 2648
	<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

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Philip Berent		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236218
Mailing Address 1 N Dee Rd Unit 1 H		Amount of Each Receipt this Period 50.00
City Park Ridge	State IL	Zip Code 60068
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) B. Ms. Evelyn Berezin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237237
Mailing Address 10 Tinker Lane		Amount of Each Receipt this Period 50.00
City Setauket	State NY	Zip Code 11733
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 ▼ 1625.00	

Full Name (Last, First, Middle Initial) C. Ms. Evelyn Berezin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2014 Transaction ID : 4243090
Mailing Address 10 Tinker Lane		Amount of Each Receipt this Period 100.00
City Setauket	State NY	Zip Code 11733
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 ▼ 1625.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 120 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jaqualine Berger		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234260
Mailing Address 181 Bernhardt Dr		Amount of Each Receipt this Period 15.00
City Snyder	State NY	Zip Code 14226
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Ms. Nancy Bergfeld		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228498
Mailing Address 2742 Wild Valley Dr		Amount of Each Receipt this Period 50.00
City High Ridge	State MO	Zip Code 63049
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Educational Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) C. Ms. Nancy Bergfeld		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241301
Mailing Address 2742 Wild Valley Dr		Amount of Each Receipt this Period 50.00
City High Ridge	State MO	Zip Code 63049
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Educational Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 121 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Ellen A. Berghamer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3580 Shaw Ave
 Apt. 212
 City Cincinnati State OH Zip Code 45208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227456
 Amount of Each Receipt this Period
 85.00

B. Dr. Janet L. Bergman
 Full Name (Last, First, Middle Initial)
 Mailing Address 6173 Island Walk C
 City Boca Raton State FL Zip Code 33496
 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 ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237182
 Amount of Each Receipt this Period
 50.00

C. Ms. Virginia E. Bergman
 Full Name (Last, First, Middle Initial)
 Mailing Address 4595 County P
 City Rhinelander State WI Zip Code 54501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228500
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
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 122 OF 2648
	(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

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)
EMILY's List

A. Ms. Virginia E. Bergman
Full Name (Last, First, Middle Initial)
Mailing Address 4595 County P
City Rhinelander State WI Zip Code 54501
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241883
Amount of Each Receipt this Period
20.00

B. Debora Bergstrom
Full Name (Last, First, Middle Initial)
Mailing Address 1701 N Us Highway 1
City Ormond Beach State FL Zip Code 32174
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Rn
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
11 / 30 / 2014
Transaction ID : 4229580
Amount of Each Receipt this Period
15.00

C. Debora Bergstrom
Full Name (Last, First, Middle Initial)
Mailing Address 1701 N Us Highway 1
City Ormond Beach State FL Zip Code 32174
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Rn
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
12 / 28 / 2014
Transaction ID : 4241780
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 123 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Nancy Bergstrom
 Full Name (Last, First, Middle Initial)
 Mailing Address 3935 Ramble Creek DR
 City Missouri City State TX Zip Code 77459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Texas Houston Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2020.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231962
 Amount of Each Receipt this Period
110.00

B. Ms. Marjorie Berk
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 E. 14th St. #1117
 City New York State NY Zip Code 10003
 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 **405.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228365
 Amount of Each Receipt this Period
30.00

C. Ms. Marjorie Berk
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 E. 14th St. #1117
 City New York State NY Zip Code 10003
 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 **405.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241039
 Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....	170.00
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 124 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Lawrence D Berkowitz		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237091
Mailing Address 9138 Gleneagle Dr		Amount of Each Receipt this Period 40.00
City Blaine	State WA	Zip Code 98230
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 ▼ 420.00	

Full Name (Last, First, Middle Initial) B. Deidre Berkowitz		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228501
Mailing Address 1570 Elmwood Apt 1107		Amount of Each Receipt this Period 15.00
City Evanston	State IL	Zip Code 60201
FEC ID number of contributing federal political committee. C		
Name of Employer Unemployed	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

Full Name (Last, First, Middle Initial) C. Deidre Berkowitz		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241884
Mailing Address 1570 Elmwood Apt 1107		Amount of Each Receipt this Period 15.00
City Evanston	State IL	Zip Code 60201
FEC ID number of contributing federal political committee. C		
Name of Employer Unemployed	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 125 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Brenda Berlin			Date of Receipt
Mailing Address 2125a Bush Street			<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4228502
San Francisco	CA	94115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
None	Retired		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Brenda Berlin			Date of Receipt
Mailing Address 2125a Bush Street			<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4241885
San Francisco	CA	94115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
None	Retired		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Carol H. Berlin			Date of Receipt
Mailing Address 19520 Sawgrass Dr., Apt. 2003			<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4227817
Boca Raton	FL	33434	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer	Occupation		
REQUESTED	REQUESTED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1165.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 126 OF 2648
	<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)
EMILY's List

A. Ms. Carol H. Berlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 19520 Sawgrass Dr., Apt. 2003
 City Boca Raton State FL Zip Code 33434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1165.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240853
 Amount of Each Receipt this Period
 100.00

B. Benjamin Berliner
 Full Name (Last, First, Middle Initial)
 Mailing Address 833 Tennessee Ln.
 City Sarasota State FL Zip Code 34234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239718
 Amount of Each Receipt this Period
 25.00

C. Roylynn Berman
 Full Name (Last, First, Middle Initial)
 Mailing Address 685 West 23rd St., #3
 City San Pedro State CA Zip Code 90731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Manufacturers Bank Occupation Bank Lender
 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
 12 / 06 / 2014
Transaction ID : 4232545
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 127 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Elizabeth S. Berman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1717 Ala Wai Blvd 2506
 City Honolulu State HI Zip Code 96815
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239131
 Amount of Each Receipt this Period
 100.00

B. Ms. Dorothy Berndt
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 Oak Ridge Road
 City Berkeley State CA Zip Code 94705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239125
 Amount of Each Receipt this Period
 15.00

C. Ms. Maria Berning
 Full Name (Last, First, Middle Initial)
 Mailing Address 20309 Seaboard Rd.
 City Malibu State CA Zip Code 90265
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230297
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 315.00
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 128 OF 2648
	<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)
EMILY's List

A. Gerry Bernstein
Full Name (Last, First, Middle Initial)

Mailing Address 220 Amber Wood Run

City Chapel Hill State NC Zip Code 27516

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 ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014

Transaction ID : 4230929

Amount of Each Receipt this Period
 35.00

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

Mailing Address 220 Amber Wood Run

City Chapel Hill State NC Zip Code 27516

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 ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4239693

Amount of Each Receipt this Period
 35.00

C. Ms. Susan Bernstein
Full Name (Last, First, Middle Initial)

Mailing Address 2625 Alcatraz # 260

City Berkeley State CA Zip Code 94705

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

Name of Employer self Occupation psychotherapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 782.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014

Transaction ID : 4243712

Amount of Each Receipt this Period
 782.00

[MEMO ITEM]
 20 shares British Petroleum

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 129 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Kristin Berry
 Full Name (Last, First, Middle Initial)
 Mailing Address 7006 Westport St.
 City Riverside State CA Zip Code 92506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Msdi Geological Survey Occupation Research Wildlife Biologis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4230930
 Amount of Each Receipt this Period
 100.00

B. Ms. Wanda Warren Berry
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 University Ave.
 City Hamilton State NY Zip Code 13346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233374
 Amount of Each Receipt this Period
 10.00

C. Ms. Wanda Warren Berry
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 University Ave.
 City Hamilton State NY Zip Code 13346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228503
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 130 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Wanda Warren Berry
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 University Ave.
 City Hamilton State NY Zip Code 13346
 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 ▼
 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241396
 Amount of Each Receipt this Period
 20.00

B. Jan Berry-Kadrie
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 201
 City Woodacre State CA Zip Code 94973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SLEF- JAN BERRY-KADRIE,M.F.T MARRIAGE& FAMILY THERAPIST
 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 / 26 / 2014
Transaction ID : 4227676
 Amount of Each Receipt this Period
 150.00

C. Ms. Susan Bertken
 Full Name (Last, First, Middle Initial)
 Mailing Address 405 Blakeridge Lane
 City Corralitos State CA Zip Code 95076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232077
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
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 131 OF 2648
	<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)
EMILY's List

A. Joseph Bertz
Full Name (Last, First, Middle Initial)

Mailing Address Cmr 423, Box 338

City Breckenridge State CO Zip Code 80424

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 ▼ **255.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2014

Transaction ID : 4237309

Amount of Each Receipt this Period
15.00

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

Mailing Address Cmr 423, Box 338

City Breckenridge State CO Zip Code 80424

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 ▼ **255.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2014

Transaction ID : 4239185

Amount of Each Receipt this Period
15.00

C. Dr. Barbara A. Best
Full Name (Last, First, Middle Initial)

Mailing Address 907 Westwood Dr. NE

City Vienna State VA Zip Code 22180

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

Name of Employer New Mexico State University Occupation Environmental Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014

Transaction ID : 4240289

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1030.00
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 132 OF 2648
	<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)
EMILY's List

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

Mailing Address 2403 West Mt. Zion Road

City State Zip Code
Crestwood KY 40014

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

Name of Employer Occupation
Oldham Co Ky Bd Of Education School Bus Driver

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228505

Amount of Each Receipt this Period
20.00

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

Mailing Address 2403 West Mt. Zion Road

City State Zip Code
Crestwood KY 40014

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

Name of Employer Occupation
Oldham Co Ky Bd Of Education School Bus Driver

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241791

Amount of Each Receipt this Period
20.00

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

Mailing Address 1207 N Mar Vista Ave

City State Zip Code
Pasadena CA 91104

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4230156

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00

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 133 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Cynthia Betances

Mailing Address 1207 N Mar Vista Ave

City Pasadena State CA Zip Code 91104

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
12 / 11 / 2014
Transaction ID : 4234914

Amount of Each Receipt this Period
25.00

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

Mailing Address 1207 N Mar Vista Ave

City Pasadena State CA Zip Code 91104

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240798

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Ms. Rose S. Bethe

Mailing Address 324 Savage Farm Drive

City Ithaca State NY Zip Code 14850

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

Name of Employer Occupation
Requested Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
12 / 17 / 2014
Transaction ID : 4237739

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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 134 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lieselotte N. Betterman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2014 Transaction ID : 4230931
Mailing Address 1506 W. Willow Ln.		Amount of Each Receipt this Period 100.00
City Mount Prospect	State IL	Zip Code 60056
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 ▼ 550.00	

Full Name (Last, First, Middle Initial) B. Ms. Ardith M. Betts		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233630
Mailing Address 1001 College Avenue		Amount of Each Receipt this Period 15.00
City Alameda	State CA	Zip Code 94501
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 ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Ms. Dianne Beuke		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227545
Mailing Address 22 Old School House Rd		Amount of Each Receipt this Period 100.00
City Hyannis	State MA	Zip Code 02601
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 ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	215.00
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 135 OF 2648
	<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)
EMILY's List

A. Dr. Edna R Bick
Full Name (Last, First, Middle Initial)
Mailing Address 9468 Beecher Road

City Flushing	State MI	Zip Code 48433
------------------	-------------	-------------------

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

Name of Employer Genesys Pho	Occupation Physician
---------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228506

Amount of Each Receipt this Period
100.00

B. Mr. Harold L. Bickler
Full Name (Last, First, Middle Initial)
Mailing Address 240 Hedge Road

City Menlo Park	State CA	Zip Code 94025
--------------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y
12	/	10	/	2014

Transaction ID : 4234319

Amount of Each Receipt this Period
50.00

C. Mr. Lawrence Biddle
Full Name (Last, First, Middle Initial)
Mailing Address 913 Prospect Court S

City Saint Petersburg	State FL	Zip Code 33701
--------------------------	-------------	-------------------

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

Name of Employer Planningworks Llc	Occupation Requested
---------------------------------------	-------------------------

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
12	/	03	/	2014

Transaction ID : 4231898

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 136 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. David Bidgood		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014
Mailing Address 1428 S Pearl St		Transaction ID : 4236220
City Independence	State MO	Zip Code 64055
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 ▼ 300.00	
		Amount of Each Receipt this Period 25.00

Full Name (Last, First, Middle Initial) B. Ms. Lisa A. Bielefeld		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014
Mailing Address 132 Mount Vernon St.		Transaction ID : 4243400
City Arlington	State MA	Zip Code 02476
FEC ID number of contributing federal political committee.	C	
Name of Employer Ibm	Occupation Software Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		Amount of Each Receipt this Period 250.00

Full Name (Last, First, Middle Initial) C. Ms. Joan Bielskas		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014
Mailing Address 53 Columbine Ln		Transaction ID : 4230300
City Kings Park	State NY	Zip Code 11754
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 ▼ 250.00	
		Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional).....▶	425.00
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 137 OF 2648
	<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)
EMILY's List

A. Ms. Mary E. Biggar
Full Name (Last, First, Middle Initial)
Mailing Address 50 Sycamore St.
City Albany State NY Zip Code 12208
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4230111
Amount of Each Receipt this Period
20.00

B. Ms. Mary E. Biggar
Full Name (Last, First, Middle Initial)
Mailing Address 50 Sycamore St.
City Albany State NY Zip Code 12208
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240739
Amount of Each Receipt this Period
20.00

C. Ms. Penelope P. Biggs
Full Name (Last, First, Middle Initial)
Mailing Address 240 E 47th St., Apt. 23D
City New York State NY Zip Code 10017
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014
Transaction ID : 4243204
Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶ 1040.00
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 138 OF 2648
	<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)
EMILY's List

A. Teresa Bigham
Full Name (Last, First, Middle Initial)
Mailing Address 416 Creekside Dr
City Amarillo State TX Zip Code 79124
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
12 / 14 / 2014
Transaction ID : 4235451
Amount of Each Receipt this Period 200.00

B. Ms. Shirley Bild
Full Name (Last, First, Middle Initial)
Mailing Address 10559 Hackamore Lane
City Saint Louis State MO Zip Code 63128
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 ▼ 595.00

Date of Receipt
12 / 16 / 2014
Transaction ID : 4237079
Amount of Each Receipt this Period 10.00

C. Ms. Arlene M. Billy
Full Name (Last, First, Middle Initial)
Mailing Address 220 Spruce St
City Half Moon Bay State CA Zip Code 94019
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 ▼ 275.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233367
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 139 OF 2648
	<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)
EMILY's List

A. Ms. Lesley D Birch
Full Name (Last, First, Middle Initial)
Mailing Address 1225 Chapel Drive

City Santa Clara	State CA	Zip Code 95050
---------------------	-------------	-------------------

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 ▼
785.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	26	/	2014

Transaction ID : 4227820

Amount of Each Receipt this Period
50.00

B. Douglas Bird
Full Name (Last, First, Middle Initial)
Mailing Address 17 Edgewood Street

City Bar Harbor	State ME	Zip Code 04609
--------------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4231719

Amount of Each Receipt this Period
20.00

C. Roseann Birrittella
Full Name (Last, First, Middle Initial)
Mailing Address 76 Laight St., Apt. 10

City New York	State NY	Zip Code 10013
------------------	-------------	-------------------

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

Name of Employer Polo Ralph Lauren	Occupation EVP Advertising & Wo
---------------------------------------	------------------------------------

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
12	/	12	/	2014

Transaction ID : 4235210

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional).....▶	195.00
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 140 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

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

Mailing Address 3200 N. Lake Shore Drive
#1801

City Chicago State IL Zip Code 60657

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

Name of Employer None - Self Employed Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230302

Amount of Each Receipt this Period
144.00

Full Name (Last, First, Middle Initial)
B. Ms. Margaret C. Bisberg

Mailing Address 1506 Courtland Ave

City Park Ridge State IL Zip Code 60068

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 ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237435

Amount of Each Receipt this Period
125.00

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

Mailing Address 23158 SW Cinnamon Hills Pl

City Sherwood State OR Zip Code 97140

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

Name of Employer Wacom Technologies Occupation Software Qa Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228508

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 289.00

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 141 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kathleen Bissell		Date of Receipt
Mailing Address 23158 SW Cinnamon Hills Pl		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Sherwood OR 97140		Transaction ID : 4241886
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Wacom Technologies Software Qa Engineer		<input type="text" value="220.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. Lewis Bivins , Jr.		Date of Receipt
Mailing Address 4214 Bel Pre Rd		<input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City State Zip Code Rockville MD 20853		Transaction ID : 4234014
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Montgomery Co Schools Bus Operator		<input type="text" value="15.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	

Full Name (Last, First, Middle Initial) C. Robert Bjork		Date of Receipt
Mailing Address 44155 Brick Yard Road		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City State Zip Code Sauk Centre MN 56378		Transaction ID : 4232963
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation None Retired		<input type="text" value="45.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="335.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="80.00"/>
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: (check only one)	PAGE 142 OF 2648
	<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	

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Laura A. Bjorkman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014
Mailing Address 4128 North Cedar		Transaction ID : 4234521
City Spokane	State WA	Zip Code 99205
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer RES, Inc	Occupation Counselor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) B. Nancy Blachman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2014
Mailing Address 1538 Burlingame Ave		Transaction ID : 4242977
City Burlingame	State CA	Zip Code 94010
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Math Delights	Occupation Math Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Prof. Allida M. Black		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014
Mailing Address 2001 N Kenilworth St		Transaction ID : 4236563
City Arlington	State VA	Zip Code 22205
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Four Freedoms Park Conservancy, Llc	Occupation Historian/Writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2490.00	

SUBTOTAL of Receipts This Page (optional).....▶	1130.00
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 143 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Prof. Alida M. Black
 Full Name (Last, First, Middle Initial)
 Mailing Address 2001 N Kenilworth St
 City Arlington State VA Zip Code 22205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Four Freedoms Park Conservancy, Llc Occupation Historian/Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2490.00

Date of Receipt 12 / 15 / 2014
Transaction ID : 4236577
 Amount of Each Receipt this Period 239.38

B. Susan Black
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Riverside Dr., Apt. 4-SE
 City New York State NY Zip Code 10023
 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 ▼ 225.00

Date of Receipt 12 / 01 / 2014
Transaction ID : 4230304
 Amount of Each Receipt this Period 100.00

C. Mr. Farris Black
 Full Name (Last, First, Middle Initial)
 Mailing Address 2717 Ground Robin Dr.
 City North Las Vegas State NV Zip Code 89084
 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 ▼ 650.00

Date of Receipt 11 / 26 / 2014
Transaction ID : 4227689
 Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional).....▶	639.38
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 144 OF 2648
	<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)
EMILY's List

A. Mrs. Catherine H. Blacka
 Full Name (Last, First, Middle Initial)
 Mailing Address 6413 Fairest Dream Ln
 City Columbia State MD Zip Code 21044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Presbytery Of Baltimore, Pcusa Occupation Stated Clerk
 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
 12 / 03 / 2014
Transaction ID : 4231677
 Amount of Each Receipt this Period
 25.00

B. Ms. Bernadeane Blackburn
 Full Name (Last, First, Middle Initial)
 Mailing Address 32020 S Bella Vista Rd.
 City Worley State ID Zip Code 83876
 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 ▼ 1313.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240305
 Amount of Each Receipt this Period
 50.00

C. Dawn Black-Fox
 Full Name (Last, First, Middle Initial)
 Mailing Address 912 Garfield St
 City Canon City State CO Zip Code 81212
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230098
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 145 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dawn Black-Fox
 Full Name (Last, First, Middle Initial)
 Mailing Address 912 Garfield St
 City State Zip Code
 Canon City CO 81212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240723
 Amount of Each Receipt this Period
 20.00

B. Charles Blackman
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 27216
 City State Zip Code
 Lansing MI 48909
 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 ▼
 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240321
 Amount of Each Receipt this Period
 23.00

C. Ms. Barbara Blackstone
 Full Name (Last, First, Middle Initial)
 Mailing Address 227 NE 61st Ave Unit 2
 City State Zip Code
 Portland OR 97213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Blackstone Associates Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231652
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	68.00
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 146 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Rev. Christine E Blair		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238411
Mailing Address 1402 N Mills Avenue		Amount of Each Receipt this Period 100.00
City Claremont	State CA	Zip Code 91711
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Pastor, Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) B. Ms. Peggy Blair		Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2014 Transaction ID : 4241044
Mailing Address 602 Rivage Cir		Amount of Each Receipt this Period 20.00
City Folsom	State CA	Zip Code 95630
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 ▼ 594.00	

Full Name (Last, First, Middle Initial) C. Ms. Peggy Blair		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232011
Mailing Address 602 Rivage Cir		Amount of Each Receipt this Period 30.00
City Folsom	State CA	Zip Code 95630
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 ▼ 594.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 147 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

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

Mailing Address 610 Walnut

City Burlington State IA Zip Code 52601

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
12 / 20 / 2014
Transaction ID : 4239179

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Ms. Frances E. Blair

Mailing Address 115 Montgomery Stret

City Steilacoom State WA Zip Code 98388

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

Name of Employer Occupation
Steilacoom School District Substitute Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
12 / 10 / 2014
Transaction ID : 4234474

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Dr. Donna Wells Blake

Mailing Address 10856 Parcel Court

City Oakton State VA Zip Code 22124

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

Name of Employer Occupation
Scientist Self Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2200.00

Date of Receipt
12 / 20 / 2014
Transaction ID : 4244892

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 148 OF 2648
	<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)
EMILY's List

A. Ms. Joyce Blalock
Full Name (Last, First, Middle Initial)
Mailing Address 1301 Arenal Ct.
City Santa Fe State NM Zip Code 87501
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 ▼ 226.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 08 / 2014
Transaction ID : 4233838
Amount of Each Receipt this Period
113.00

B. Ms. Judith E Blanchard
Full Name (Last, First, Middle Initial)
Mailing Address 1014 Villacourt Drive
City Seabrook State TX Zip Code 77586
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 12 / 2014
Transaction ID : 4235695
Amount of Each Receipt this Period
50.00

C. Prof. Nelfred Blanding
Full Name (Last, First, Middle Initial)
Mailing Address 7512 Candytuft Ct.
City Springfield State VA Zip Code 22153
FEC ID number of contributing federal political committee. **C**
Name of Employer Fairfax County Occupation Community Developer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 03 / 2014
Transaction ID : 4231980
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 213.00
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 149 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Donna Blank
 Full Name (Last, First, Middle Initial)
 Mailing Address 8011 Glenmore Spring Road
 City State Zip Code
 Bethesda MD 20817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Self
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 288.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240306
 Amount of Each Receipt this Period
 53.00

B. Ms. Mary Ann Blaska
 Full Name (Last, First, Middle Initial)
 Mailing Address 1918 Burning Bush
 City State Zip Code
 Rochester Hills MI 48309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None 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
 12 / 15 / 2014
Transaction ID : 4236656
 Amount of Each Receipt this Period
 10.00

C. Mr. Robert L Blau
 Full Name (Last, First, Middle Initial)
 Mailing Address 8100 Parkdale Drive
 City State Zip Code
 Austin TX 78757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Texas Dfps Systems Analyst
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237124
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 83.00
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 150 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Nancy Bleeker

Mailing Address 8017 Greenwich Woods Drive

City McLean	State VA	Zip Code 22102
----------------	-------------	-------------------

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 ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		28		2014

Transaction ID : 4228511

Amount of Each Receipt this Period
50.00

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

Mailing Address 8017 Greenwich Woods Drive

City McLean	State VA	Zip Code 22102
----------------	-------------	-------------------

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 ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		13		2014

Transaction ID : 4236152

Amount of Each Receipt this Period
50.00

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

Mailing Address 8017 Greenwich Woods Drive

City McLean	State VA	Zip Code 22102
----------------	-------------	-------------------

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 ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		28		2014

Transaction ID : 4241607

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 151 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Anne W. Bleich

Mailing Address 1500 Brecknock Rd., Apt. 210

City Greenport	State NY	Zip Code 11944
-------------------	-------------	-------------------

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 ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	11	/	2014

Transaction ID : 4234716

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Ms. Jennifer Blessing

Mailing Address 499 1st Street

City Brooklyn	State NY	Zip Code 11215
------------------	-------------	-------------------

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

Name of Employer Guggenheim Museum	Occupation Curator
---------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228513

Amount of Each Receipt this Period
22.00

Full Name (Last, First, Middle Initial)
C. Ms. Jennifer Blessing

Mailing Address 499 1st Street

City Brooklyn	State NY	Zip Code 11215
------------------	-------------	-------------------

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

Name of Employer Guggenheim Museum	Occupation Curator
---------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241890

Amount of Each Receipt this Period
22.00

SUBTOTAL of Receipts This Page (optional).....▶	244.00
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 152 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Mary E. Bliss

Mailing Address 5 Farm Haven Ct.

City Rockville	State MD	Zip Code 20852
-------------------	-------------	-------------------

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

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

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
12	/	03	/	2014

Transaction ID : 4231556

Amount of Each Receipt this Period
100.00

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

Mailing Address 3427 Sunleaf Way

City Richmond	State CA	Zip Code 94806
------------------	-------------	-------------------

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

Name of Employer Kasier Foundation Hospitals	Occupation It Professional
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4232022

Amount of Each Receipt this Period
10.00

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

Mailing Address 3427 Sunleaf Way

City Richmond	State CA	Zip Code 94806
------------------	-------------	-------------------

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

Name of Employer Kasier Foundation Hospitals	Occupation It Professional
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	13	/	2014

Transaction ID : 4236222

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 153 OF 2648
	<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)
EMILY's List

A. Ms. Susan F. Bloom
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 157

City Mattituck	State NY	Zip Code 11952
-------------------	-------------	-------------------

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
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : 4232215

Amount of Each Receipt this Period
 125.00

B. Mr. David Bloss
Full Name (Last, First, Middle Initial)
Mailing Address 1150 Breton St

City Grand Rapids	State MI	Zip Code 49506
----------------------	-------------	-------------------

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

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

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
 12 / 03 / 2014
Transaction ID : 4231575

Amount of Each Receipt this Period
 25.00

C. Ms. Marion Boast
Full Name (Last, First, Middle Initial)
Mailing Address 1100 S Euclid St Unit 72

City Grandview	State WA	Zip Code 98930
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236694

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 154 OF 2648
	<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)
EMILY's List

A. Dr. Tess J. Bobo
Full Name (Last, First, Middle Initial)
Mailing Address 134 Albany
City San Antonio State TX Zip Code 78209
FEC ID number of contributing federal political committee. **C**
Name of Employer Dept Of Defense Occupation Doctor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 12 / 23 / 2014
Transaction ID : 4239721
Amount of Each Receipt this Period 100.00

B. Karen Boctor
Full Name (Last, First, Middle Initial)
Mailing Address 12816 130th Ct NE
City Kirkland State WA Zip Code 98034
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 ▼ 225.00
Date of Receipt 12 / 12 / 2014
Transaction ID : 4235225
Amount of Each Receipt this Period 75.00

C. Ms. Linda Boghrati
Full Name (Last, First, Middle Initial)
Mailing Address 23 Paseo Mirasol
City Belvedere Tiburon State CA Zip Code 94920
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Home Maker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00
Date of Receipt 12 / 12 / 2014
Transaction ID : 4235319
Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
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 155 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Bogue		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2014
Mailing Address 7316 Rippon Road		Transaction ID : 4238350
City Alexandria	State VA	Zip Code 22307
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Self Employed	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Ms. Janice Bohman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014
Mailing Address 1414 Pitman Ave		Transaction ID : 4237125
City Palo Alto	State CA	Zip Code 94301
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer Self	Occupation Finance, Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.00	

Full Name (Last, First, Middle Initial) C. Mrs. Melody Boime		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014
Mailing Address 27 Oak Park Dr		Transaction ID : 4230308
City Saint Louis	State MO	Zip Code 63141
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00	
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.00	

SUBTOTAL of Receipts This Page (optional).....▶	155.00
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 156 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. H. Abigail Bok
 Full Name (Last, First, Middle Initial)
 Mailing Address 435 Tremont Ave.
 City Richmond State CA Zip Code 94801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Freelance Editor
 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
 12 / 15 / 2014
Transaction ID : 4236544
 Amount of Each Receipt this Period
 100.00

B. Dr. Else Bolotin , PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 Beaumont Centre Ln Apt 28205
 City Lexington State KY Zip Code 40513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233371
 Amount of Each Receipt this Period
 10.00

C. Dr. Else Bolotin , PhD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 Beaumont Centre Ln Apt 28205
 City Lexington State KY Zip Code 40513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4244776
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 157 OF 2648
	<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)
EMILY's List

A. Dr. Else Bolotin , PhD
Full Name (Last, First, Middle Initial)

Mailing Address 1101 Beaumont Centre Ln Apt 28205

City	State	Zip Code
Lexington	KY	40513

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 ▼
215.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : 4236832

Amount of Each Receipt this Period
15.00

B. Mr. Stuart Bondurant
Full Name (Last, First, Middle Initial)

Mailing Address 209 Cedar Berry Ln

City	State	Zip Code
Chapel Hill	NC	27517

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

Name of Employer	Occupation
Requested	Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014

Transaction ID : 4230310

Amount of Each Receipt this Period
250.00

C. Mr. Fraser A. Bonnell
Full Name (Last, First, Middle Initial)

Mailing Address 316 Vassar Avel

City	State	Zip Code
Kensington	CA	94708

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

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1810.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2014

Transaction ID : 4231761

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	415.00
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 158 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Regina M. Bonney		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4244777
Mailing Address 126 Sandy Point Rd		Amount of Each Receipt this Period 16.67
City Old Saybrook	State CT	Zip Code 06475
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 ▼ 250.05	

Full Name (Last, First, Middle Initial) B. Ms. Amy Bonoff		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243224
Mailing Address 14 Sutton Pl. S, Apt. 11d		Amount of Each Receipt this Period 180.00
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) C. Lois Bookman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233401
Mailing Address 14855 La Rinconada Dr		Amount of Each Receipt this Period 50.00
City Los Gatos	State CA	Zip Code 95033
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional).....▶	246.67
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 159 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Gina Boonshoft
 Full Name (Last, First, Middle Initial)
 Mailing Address 321 West 104th St
 City State Zip Code
 New York NY 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Freelance Film/Tv Production
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243333
 Amount of Each Receipt this Period
 250.00

B. Ms. Lynda E. Boose
 Full Name (Last, First, Middle Initial)
 Mailing Address 1809 Jericho St
 City State Zip Code
 White River Junction VT 05001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Dartmouth College 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 / 28 / 2014
Transaction ID : 4228518
 Amount of Each Receipt this Period
 20.00

C. Ms. Lynda E. Boose
 Full Name (Last, First, Middle Initial)
 Mailing Address 1809 Jericho St
 City State Zip Code
 White River Junction VT 05001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Dartmouth College 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
 12 / 28 / 2014
Transaction ID : 4241643
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00
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 160 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Diane M. Booth		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014
Mailing Address 3609 Holly Hills Ct		Transaction ID : 4236037
City Columbia	State MO	Zip Code 65203
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 420.00	
Name of Employer Sebaugh's Information Services	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) B. Ms. Barbara Booth		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014
Mailing Address 415 Magowan Ave		Transaction ID : 4233247
City Iowa City	State IA	Zip Code 52246
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer University Of Iowa	Occupation Scientific Educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Ms. Karen J. Bopp		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 6505 Lily Dhu Lane		Transaction ID : 4228519
City Falls Church	State VA	Zip Code 22044
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1450.00	

SUBTOTAL of Receipts This Page (optional).....▶	242.00
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 161 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Karen J. Bopp
 Full Name (Last, First, Middle Initial)
 Mailing Address 6505 Lily Dhu Lane
 City Falls Church State VA Zip Code 22044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241230
 Amount of Each Receipt this Period
 100.00

B. Mr. Phillip Bordanave
 Full Name (Last, First, Middle Initial)
 Mailing Address 655 6th ave. #304
 City San Diego State CA Zip Code 92101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4244848
 Amount of Each Receipt this Period
 25.00

C. Ms. Muriel Borish
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 Bancroft Mills Rd., Apt. 2H
 City Wilmington State DE Zip Code 19806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228520
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
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 162 OF 2648
	<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)
EMILY's List

A. Ms. Muriel Borish
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 Bancroft Mills Rd., Apt. 2H
 City State Zip Code
 Wilmington DE 19806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241892
 Amount of Each Receipt this Period
 200.00

B. Ms. Lori Bornstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 Louis Farley Dr
 City State Zip Code
 Framingham MA 01702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Newbury Prime Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239211
 Amount of Each Receipt this Period
 25.00

C. Mrs. Ann E. Bornstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 61 Devon Ct
 City State Zip Code
 Watsonville CA 95076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 None Retired
 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
 12 / 15 / 2014
Transaction ID : 4236885
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 163 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Ann E. Bornstein		Date of Receipt
Mailing Address 61 Devon Ct		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Watsonville	CA	95076
FEC ID number of contributing federal political committee.		Transaction ID : 4236886
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Drucy S. Borowitz		Date of Receipt
Mailing Address 50 Dauphin Drive		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
Williamsville	NY	14221
FEC ID number of contributing federal political committee.		Transaction ID : 4232257
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
Childrens Hosp./Buffalo	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Barbara F. Borthwick		Date of Receipt
Mailing Address 14500 Fruitvale Ave. Apt. 6149		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Saratoga	CA	95070
FEC ID number of contributing federal political committee.		Transaction ID : 4235181
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1200.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1600.00"/>
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: (check only one)	PAGE 164 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lee Bory		Date of Receipt 12 / 13 / 2014 Transaction ID : 4236223
Mailing Address 39 s park dr		Amount of Each Receipt this Period 20.00
City Arlington	State VA	Zip Code 22204
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Mrs. Claudia Bosack		Date of Receipt 12 / 08 / 2014 Transaction ID : 4232953
Mailing Address 17 Lansing Street		Amount of Each Receipt this Period 100.00
City Carmel	State NY	Zip Code 10512
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 ▼ 340.00	

Full Name (Last, First, Middle Initial) C. Ms. Marguerite Boslaugh		Date of Receipt 12 / 02 / 2014 Transaction ID : 4230936
Mailing Address 21 Timber Ridge Dr.		Amount of Each Receipt this Period 125.00
City Simsbury	State CT	Zip Code 06070
FEC ID number of contributing federal political committee. C		
Name of Employer CIGNA	Occupation Portfolio Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	245.00
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 165 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Kerry Bossin

Mailing Address 12602 Park St.

City State Zip Code
Cerritos CA 90703

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 ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4230937

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Elizabeth Bouchard

Mailing Address 418 Church St. #2

City State Zip Code
Evanston IL 60201

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 ▼
265.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4244778

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Ms. Elizabeth Bouchard

Mailing Address 418 Church St. #2

City State Zip Code
Evanston IL 60201

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 ▼
265.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235430

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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 166 OF 2648
	<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)
EMILY's List

A. Antonia Boucharx
Full Name (Last, First, Middle Initial)

Mailing Address 2400 M Street NW Apt 131

City Washington State DC Zip Code 20037

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

Name of Employer Smartpower Occupation Vice 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
 11 / 27 / 2014

Transaction ID : 4228357

Amount of Each Receipt this Period
 250.00

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

Mailing Address 2400 M Street NW Apt 131

City Washington State DC Zip Code 20037

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

Name of Employer Smartpower Occupation Vice 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
 12 / 27 / 2014

Transaction ID : 4241189

Amount of Each Receipt this Period
 25.00

c. Cheryl Bough
Full Name (Last, First, Middle Initial)

Mailing Address 1610 Vernal Ave

City Fremont State CA Zip Code 94539

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

Name of Employer Self Occupation Volunteer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237734

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 167 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Christine Bourg		Date of Receipt
Mailing Address 4512 Second St		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City Pleasanton	State CA	Zip Code 94566
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4238419
Name of Employer: None		Amount of Each Receipt this Period
Occupation: Retired		<input type="text" value="240.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="240.00"/>

Full Name (Last, First, Middle Initial) B. Ms. June Bourne		Date of Receipt
Mailing Address 469 Savstrom Way		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City San Jose	State CA	Zip Code 95111
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4228524
Name of Employer: None		Amount of Each Receipt this Period
Occupation: Retired		<input type="text" value="40.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="600.00"/>

Full Name (Last, First, Middle Initial) C. Ms. June Bourne		Date of Receipt
Mailing Address 469 Savstrom Way		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City San Jose	State CA	Zip Code 95111
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4241895
Name of Employer: None		Amount of Each Receipt this Period
Occupation: Retired		<input type="text" value="40.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="600.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 168 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Christopher C. Boutelle
 Full Name (Last, First, Middle Initial)
 Mailing Address 1722 Hollyvista Ave
 City Los Angeles State CA Zip Code 90017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237240
 Amount of Each Receipt this Period
 15.00

B. Ms. Kathryn Bowen-Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 8873 SE Retreat Drive
 City Hobe Sound State FL Zip Code 33455
 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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232734
 Amount of Each Receipt this Period
 25.00

C. Ms. Martha A. Boyd
 Full Name (Last, First, Middle Initial)
 Mailing Address 2608 Fiset Drive
 City Austin State TX Zip Code 78731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 538.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238422
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 169 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Martha A. Boyd

Mailing Address 2608 Fiset Drive

City State Zip Code
Austin TX 78731

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 ▼
538.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241400

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Ms. Melanie Boyer

Mailing Address 1860 California St NW Apt 104

City State Zip Code
Washington DC 20009

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

Name of Employer Occupation
Center For Health And Gender Equity Wrtier

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
 12 / 09 / 2014
Transaction ID : 4234026

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Barbara F. Boyle

Mailing Address 16 Joy Street

City State Zip Code
Springvale ME 04083

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

Name of Employer Occupation
None Retired

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
 12 / 19 / 2014
Transaction ID : 4238424

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00

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 170 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. George Boynton		Date of Receipt 12 / 13 / 2014 Transaction ID : 4236159
Mailing Address 1 Oaknoll Court		Amount of Each Receipt this Period 25.00
City Iowa City	State IA	Zip Code 52246
FEC ID number of contributing federal political committee. C		
Name of Employer University Of Iowa	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Ms. Barbara Braak		Date of Receipt 12 / 05 / 2014 Transaction ID : 4232736
Mailing Address 3829 82nd St		Amount of Each Receipt this Period 25.00
City Des Moines	State IA	Zip Code 50322
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) C. Ms. Dona DeSanctis Bracone		Date of Receipt 12 / 17 / 2014 Transaction ID : 4237441
Mailing Address 2804 Buxmont Lane		Amount of Each Receipt this Period 100.00
City Bowie	State MD	Zip Code 20715
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 171 OF 2648
	(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)
EMILY's List

A. Elsa-Karen Braden
Full Name (Last, First, Middle Initial)
Mailing Address 11368 Harkers Ct.
City Cypress State CA Zip Code 90630
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
12 / 26 / 2014
Transaction ID : 4240762
Amount of Each Receipt this Period
250.00

B. Ms. Joan Braderman
Full Name (Last, First, Middle Initial)
Mailing Address 36 Fruit St.
City Northampton State MA Zip Code 01060
FEC ID number of contributing federal political committee. **C**
Name of Employer Hampshire College Occupation Professor And Filmmaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231854
Amount of Each Receipt this Period
40.00

C. Ms. Mary Ellen Bradford
Full Name (Last, First, Middle Initial)
Mailing Address 5481 Torrance Blvd Apt 358
City Torrance State CA Zip Code 90503
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233294
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 172 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Mary Ellen Bradford
 Full Name (Last, First, Middle Initial)
 Mailing Address 5481 Torrance Blvd Apt 358
 City Torrance State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233576
 Amount of Each Receipt this Period
 10.00

B. Ms. Helga Bradish
 Full Name (Last, First, Middle Initial)
 Mailing Address 923 3rd Str.
 City Santa Monica State CA Zip Code 90403
 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 ▼ 317.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233557
 Amount of Each Receipt this Period
 10.00

C. Ms. Kathleen Brady
 Full Name (Last, First, Middle Initial)
 Mailing Address 149 fayerweather st
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dept Of Public Health, Mass Occupation M.D.
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238425
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 173 OF 2648
	<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)
EMILY's List

A. Ms. Olivia Brady
Full Name (Last, First, Middle Initial)
Mailing Address 728 Stanbridge St
City Norristown State PA Zip Code 19401
FEC ID number of contributing federal political committee. **C**
Name of Employer The Vanguard Group Occupation Systems Analyst
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.00

Date of Receipt 12 / 21 / 2014
Transaction ID : 4244897
Amount of Each Receipt this Period 21.00

B. Mr. David Braff
Full Name (Last, First, Middle Initial)
Mailing Address 3218 172nd St.
City Flushing State NY Zip Code 11358
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 ▼ 382.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4234817
Amount of Each Receipt this Period 50.00

C. Nancy Brago Bart
Full Name (Last, First, Middle Initial)
Mailing Address 1928 North Street
City Phila State PA Zip Code 19130
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 ▼ 615.00

Date of Receipt 12 / 01 / 2014
Transaction ID : 4230939
Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 146.00
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 174 OF 2648
	<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)
EMILY's List

A. Peter Braham
Full Name (Last, First, Middle Initial)
Mailing Address 715 N. Nelson Street
City Arlington State VA Zip Code 22203
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **320.00**

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236518
Amount of Each Receipt this Period
50.00

B. Ms. Holly Brajcich
Full Name (Last, First, Middle Initial)
Mailing Address 1632 W Wilson Ave Unit B
City Spokane State WA Zip Code 99201
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt
12 / 12 / 2014
Transaction ID : 4235208
Amount of Each Receipt this Period
50.00

C. Robert Branche
Full Name (Last, First, Middle Initial)
Mailing Address 1446 East Almeria Road
City Phoenix State AZ Zip Code 85006
FEC ID number of contributing federal political committee. **C**
Name of Employer U.S. Public Health Service Occupation Health Care
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **290.00**

Date of Receipt
11 / 28 / 2014
Transaction ID : 4228532
Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... **130.00**
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 175 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Robert Branche
Full Name (Last, First, Middle Initial)
Mailing Address 1446 East Almeria Road

City Phoenix	State AZ	Zip Code 85006
-----------------	-------------	-------------------

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

Name of Employer U.S. Public Health Service	Occupation Health Care
--	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241328

Amount of Each Receipt this Period
300.00

B. Dr. Barbara B. Brand
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 129

City Becket	State MA	Zip Code 01223
----------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4240298

Amount of Each Receipt this Period
200.00

C. Bruce Brandt
Full Name (Last, First, Middle Initial)
Mailing Address 92 W. 33rd St., Apt. C4

City Bayonne	State NJ	Zip Code 07002
-----------------	-------------	-------------------

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 ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	02	/	2014

Transaction ID : 4230941

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	280.00
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 176 OF 2648
	<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)
EMILY's List

A. Mary Brandt
 Full Name (Last, First, Middle Initial)
 Mailing Address 2869 Corpus Christi St
 City Simi Valley State CA Zip Code 93063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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
 12 / 03 / 2014
Transaction ID : 4232121
 Amount of Each Receipt this Period
 25.00

B. Ms. Anita B Brannen
 Full Name (Last, First, Middle Initial)
 Mailing Address 290 Waterford Way
 City Athens State GA Zip Code 30606
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234046
 Amount of Each Receipt this Period
 50.00

C. Lewis Branscomb
 Full Name (Last, First, Middle Initial)
 Mailing Address 1600 Ludington Lane
 City La Jolla State CA Zip Code 92037
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227572
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 177 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jennifer Branton
 Full Name (Last, First, Middle Initial)
 Mailing Address Cmr 489 Box 1113
 City Apo State AE Zip Code 09751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Dod Computer Engineer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234983
 Amount of Each Receipt this Period
 50.00

B. Mr. Robert Branyan
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Jane Lane
 City Sunrise Beach State MO Zip Code 65079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231576
 Amount of Each Receipt this Period
 40.00

C. Mrs. Robin Brasso
 Full Name (Last, First, Middle Initial)
 Mailing Address 1833 11th Avenue
 City San Francisco State CA Zip Code 94122
 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 ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243497
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	340.00
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 178 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Ann Braubach		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2014 Transaction ID : 4239223
Mailing Address 3050 Airport Ave		Amount of Each Receipt this Period 25.00
City Santa Monica	State CA	Zip Code 90405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Slef	Occupation Filmmaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. Ms. Eleanor Braun		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239727
Mailing Address PO Box 117		Amount of Each Receipt this Period 25.00
City Cummaquid	State MA	Zip Code 02637
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 260.00
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 ▼	

Full Name (Last, First, Middle Initial) C. Joan Brausch		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227827
Mailing Address 106 Coventry Court		Amount of Each Receipt this Period 15.00
City Midland	State MI	Zip Code 48642
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 260.16
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 179 OF 2648
	<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)
EMILY's List

A. Susan Ruppel Bray
Full Name (Last, First, Middle Initial)
Mailing Address 14935 Rothwell Drive
City Mint Hill State NC Zip Code 28227
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **430.00**

Date of Receipt **12 / 29 / 2014**
Transaction ID : 4242863
Amount of Each Receipt this Period **15.00**

B. Susan Ruppel Bray
Full Name (Last, First, Middle Initial)
Mailing Address 14935 Rothwell Drive
City Mint Hill State NC Zip Code 28227
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **430.00**

Date of Receipt **12 / 08 / 2014**
Transaction ID : 4233701
Amount of Each Receipt this Period **25.00**

C. Ms. Ann B. Breil
Full Name (Last, First, Middle Initial)
Mailing Address 20201 Lorain Road Apt. 409
City Fairview Park State OH Zip Code 44126
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **550.00**

Date of Receipt **12 / 08 / 2014**
Transaction ID : 4233651
Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **65.00**
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 180 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Mary E. Breitlow
 Full Name (Last, First, Middle Initial)
 Mailing Address 607 Ventura Street
 City Richmond State CA Zip Code 94805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228534
 Amount of Each Receipt this Period
 45.00

B. Ms. Mary E. Breitlow
 Full Name (Last, First, Middle Initial)
 Mailing Address 607 Ventura Street
 City Richmond State CA Zip Code 94805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241401
 Amount of Each Receipt this Period
 45.00

C. Joyce Brenner
 Full Name (Last, First, Middle Initial)
 Mailing Address 8843 Rock Forest Dr.
 City Saint Louis State MO Zip Code 63123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Zeis, Inc. Occupation Acct. Exec.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2014
Transaction ID : 4238056
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
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 181 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Joyce Brenner

Mailing Address 8843 Rock Forest Dr.

City State Zip Code
Saint Louis MO 63123

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

Name of Employer Occupation
Zeis, Inc. Acct. Exec.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2014
Transaction ID : 4238055

Amount of Each Receipt this Period
 35.00

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

Mailing Address 1550 King St

City State Zip Code
Santa Rosa CA 95404

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 ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228535

Amount of Each Receipt this Period
 10.00

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

Mailing Address 1550 King St

City State Zip Code
Santa Rosa CA 95404

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 ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234213

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00

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 182 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Norman Brewer

Mailing Address 1550 King St

City Santa Rosa State CA Zip Code 95404

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 ▼
330.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4241402

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
B. Ms. Jennifer Brezicha

Mailing Address 4675 South Monaco St. #302

City Denver State CO Zip Code 80237

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

Name of Employer Occupation
Dermot Company Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239645

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
C. Ms. Dorice Brickman

Mailing Address 26 Kensington Pl

City Albany State NY Zip Code 12209

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
308.00

Date of Receipt
12 / 12 / 2014
Transaction ID : 4235267

Amount of Each Receipt this Period
57.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 142.00

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 183 OF 2648
	<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)
EMILY's List

A. Ms. Alice Bright
Full Name (Last, First, Middle Initial)
Mailing Address 5136 Beeler St
City Pittsburgh State PA Zip Code 15217
FEC ID number of contributing federal political committee. **C**
Name of Employer Carnegie Mellon Univ Occupation Librarian
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4231600
Amount of Each Receipt this Period 10.00

B. Ms. Alice Bright
Full Name (Last, First, Middle Initial)
Mailing Address 5136 Beeler St
City Pittsburgh State PA Zip Code 15217
FEC ID number of contributing federal political committee. **C**
Name of Employer Carnegie Mellon Univ Occupation Librarian
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt 12 / 13 / 2014
Transaction ID : 4236225
Amount of Each Receipt this Period 30.00

C. Bonita Brinamen
Full Name (Last, First, Middle Initial)
Mailing Address 235 Clinton Street
City Woodbridge State NJ Zip Code 07095
FEC ID number of contributing federal political committee. **C**
Name of Employer Woodbridge Township School District Occupation Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 19 / 2014
Transaction ID : 4238429
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 184 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Linda Brisson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1922 East Beecher Hill Rd
 City Owego State NY Zip Code 13827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228537
 Amount of Each Receipt this Period
 50.00

B. Linda Brisson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1922 East Beecher Hill Rd
 City Owego State NY Zip Code 13827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241403
 Amount of Each Receipt this Period
 50.00

C. Ms. Myrna R. Britton
 Full Name (Last, First, Middle Initial)
 Mailing Address 311 Dickens Way
 City Santa Cruz State CA Zip Code 95064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237933
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 185 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. L. Craig Britton
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 583
 City State Zip Code
 Port Townsend WA 98368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242546
 Amount of Each Receipt this Period
 250.00

B. Mrs. Nancy R. Brizel
 Full Name (Last, First, Middle Initial)
 Mailing Address 4800 N 33rd Ct
 City State Zip Code
 Hollywood FL 33021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Requested Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230944
 Amount of Each Receipt this Period
 150.00

C. Ms. Mary Broad
 Full Name (Last, First, Middle Initial)
 Mailing Address 2025 E. Lincoln St.
 Apt. 1101
 City State Zip Code
 Bloomington IL 61701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 290.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236226
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00
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 186 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Daniel Brocklebank
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Ferndale Rd.
 City Seven Valleys State PA Zip Code 17360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228538
 Amount of Each Receipt this Period
 15.00

B. Daniel Brocklebank
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Ferndale Rd.
 City Seven Valleys State PA Zip Code 17360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241404
 Amount of Each Receipt this Period
 15.00

C. Mr. Donald Brodeur
 Full Name (Last, First, Middle Initial)
 Mailing Address 1875 Gallen Court
 City Manteca State CA Zip Code 95337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nikon Precision, Inc. Occupation Documentation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239571
 Amount of Each Receipt this Period
 113.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 143.00
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 187 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Paula Brody

Mailing Address 1 Fitchburg St B155

City Somerville State MA Zip Code 02143

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 ▼
280.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014
Transaction ID : 4238432

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
B. Ms. Paula Brody

Mailing Address 1 Fitchburg St B155

City Somerville State MA Zip Code 02143

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 ▼
280.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4239730

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Ms. Janet Brody

Mailing Address 506 Conshohocken State Rd

City Penn Valley State PA Zip Code 19072

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 ▼
550.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 10 / 2014
Transaction ID : 4234500

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 188 OF 2648
	<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)
EMILY's List

A. Marinus Broekman
Full Name (Last, First, Middle Initial)
Mailing Address 4 Allen Place
City Fair Lawn State NJ Zip Code 07410
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 ▼ 668.50

Date of Receipt
12 / 17 / 2014
Transaction ID : 4237768
Amount of Each Receipt this Period 25.00

B. Marinus Broekman
Full Name (Last, First, Middle Initial)
Mailing Address 4 Allen Place
City Fair Lawn State NJ Zip Code 07410
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 ▼ 668.50

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238433
Amount of Each Receipt this Period 33.50

C. Ray Bromley
Full Name (Last, First, Middle Initial)
Mailing Address 37 Berkshire Blvd
City Albany State NY Zip Code 12203
FEC ID number of contributing federal political committee. **C**
Name of Employer University At Albany, Suny Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4232112
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 68.50
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 189 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. James N. Brooke
 Full Name (Last, First, Middle Initial)
 Mailing Address 302 Lakeside Drive
 City Aiken State SC Zip Code 29803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236713
 Amount of Each Receipt this Period
 25.00

B. Dr. Gay Brookes
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 W. 75 St. B
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bmcc, Cuny Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 735.00

Date of Receipt
 12 / 09 / 2014
Transaction ID : 4234115
 Amount of Each Receipt this Period
 50.00

C. Aaron Brooks
 Full Name (Last, First, Middle Initial)
 Mailing Address 4510 NE 60th Street
 City Seattle State WA Zip Code 98115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Deloitte Consulting, Llc Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 11 / 25 / 2014
Transaction ID : 4230155
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 190 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Aaron Brooks
 Full Name (Last, First, Middle Initial)
 Mailing Address 4510 NE 60th Street
 City State Zip Code
 Seattle WA 98115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Deloitte Consulting, Llc Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239731
 Amount of Each Receipt this Period
 20.00

B. Mr. Robert Brooks
 Full Name (Last, First, Middle Initial)
 Mailing Address 1110 S.W. 125th Ave., Apt. 314
 City State Zip Code
 Pembroke Pines FL 33027
 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
 12 / 06 / 2014
Transaction ID : 4232417
 Amount of Each Receipt this Period
 15.00

C. Judith M. Brooks
 Full Name (Last, First, Middle Initial)
 Mailing Address 13593 Duane St
 City State Zip Code
 Oregon City OR 97045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236227
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 191 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Mary Anne Broshek
 Full Name (Last, First, Middle Initial)
 Mailing Address 76 Shaw Hill Road
 City Andover State NH Zip Code 03216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234189
 Amount of Each Receipt this Period
 15.00

B. Ms. Barbara A. Brosnan
 Full Name (Last, First, Middle Initial)
 Mailing Address 5431 Weybridge Road
 City Weybridge State VT Zip Code 05753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None 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
 12 / 17 / 2014
Transaction ID : 4237449
 Amount of Each Receipt this Period
 100.00

C. Mr. John A. Bross
 Full Name (Last, First, Middle Initial)
 Mailing Address 1827 N Orleans St
 City Chicago State IL Zip Code 60614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230317
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 415.00
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 192 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Linda Smith Brothers		Date of Receipt
Mailing Address 22 Wildpepper Lane		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
South Dartmouth	MA	02748
FEC ID number of contributing federal political committee.		Transaction ID : 4230093
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.84"/>	

Full Name (Last, First, Middle Initial) B. Mrs. Linda Smith Brothers		Date of Receipt
Mailing Address 22 Wildpepper Lane		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
South Dartmouth	MA	02748
FEC ID number of contributing federal political committee.		Transaction ID : 4239732
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.84"/>	

Full Name (Last, First, Middle Initial) C. Ms. Heather Brown		Date of Receipt
Mailing Address 2031 Milford		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Houston	TX	77098
FEC ID number of contributing federal political committee.		Transaction ID : 4236567
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
Bracewell & Giuliani LLP	Attorney	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="700.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 193 OF 2648
	<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)
EMILY's List

A. Janice S. Brown
Full Name (Last, First, Middle Initial)

Mailing Address 18 Hazel Street

City Cambridge State MA Zip Code 02138

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014

Transaction ID : 4239173

Amount of Each Receipt this Period
 10.00

B. Mr. Peter Brown
Full Name (Last, First, Middle Initial)

Mailing Address 2012 Blue Mount Road

City Monkton State MD Zip Code 21111

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

Name of Employer None Occupation None

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
 12 / 23 / 2014

Transaction ID : 4239733

Amount of Each Receipt this Period
 25.00

C. Mrs. Marilyn K. Brown
Full Name (Last, First, Middle Initial)

Mailing Address 4609 Pebble Creek Ct

City Pensacola State FL Zip Code 32526

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 ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014

Transaction ID : 4230946

Amount of Each Receipt this Period
 53.00

SUBTOTAL of Receipts This Page (optional).....▶	88.00
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 194 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Jean Brown		Date of Receipt
Mailing Address 1290 N Western Ave Apt 205		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4227781
Name of Employer None	Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Sylvia M. Brown		Date of Receipt
Mailing Address 3718 Steelhead Drive Greenbank		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City Greenbank	State WA	Zip Code 98253
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4232136
Name of Employer None	Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
	<input type="text" value="480.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Sylvia M. Brown		Date of Receipt
Mailing Address 3718 Steelhead Drive Greenbank		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Greenbank	State WA	Zip Code 98253
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4227830
Name of Employer None	Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="25.00"/>
	<input type="text" value="480.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="145.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 195 OF 2648
	<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)
EMILY's List

A. Ms. Sylvia M. Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 3718 Steelhead Drive
 Greenbank
 City Greenbank State WA Zip Code 98253
 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 ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240801
 Amount of Each Receipt this Period
 25.00

B. Vaughn Brown , Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 918 Heatherfield Lane
 City Millersville State MD Zip Code 21108
 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 ▼ 573.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228542
 Amount of Each Receipt this Period
 10.00

C. Vaughn Brown , Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 918 Heatherfield Lane
 City Millersville State MD Zip Code 21108
 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 ▼ 573.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235394
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 196 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Vaughn Brown , Jr.

Mailing Address 918 Heatherfield Lane

City Millersville State MD Zip Code 21108

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 ▼
573.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241691

Amount of Each Receipt this Period
 10.00

Full Name (Last, First, Middle Initial)
B. Ms. Judy H Brown

Mailing Address 1181 Edgcumbe Rd

City Saint Paul State MN Zip Code 55105

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

Name of Employer None Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228544

Amount of Each Receipt this Period
 26.00

Full Name (Last, First, Middle Initial)
C. Ms. Judy H Brown

Mailing Address 1181 Edgcumbe Rd

City Saint Paul State MN Zip Code 55105

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

Name of Employer None Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241909

Amount of Each Receipt this Period
 26.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 62.00

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 197 OF 2648
	<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)
EMILY's List

A. Mr. Jay Brown
Full Name (Last, First, Middle Initial)

Mailing Address 200 Captains Row, Apt. 301

City Chelsea State MA Zip Code 02150

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
12 / 17 / 2014
Transaction ID : 4237428

Amount of Each Receipt this Period
150.00

B. Ms. Gailya Brown
Full Name (Last, First, Middle Initial)

Mailing Address 18421 Collins St Unit A

City Tarzana State CA Zip Code 91356

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

Name of Employer Vally Presbyterian Hospital Occupation Dir Of Developement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
12 / 12 / 2014
Transaction ID : 4236041

Amount of Each Receipt this Period
50.00

C. Ms. Mary Lou Brown
Full Name (Last, First, Middle Initial)

Mailing Address 139 Via Baja

City Ventura State CA Zip Code 93003

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

Name of Employer Requested Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232375

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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 198 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. James Browne		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014
Mailing Address 36 Newgate Rd.		Transaction ID : 4226699
City Pittsburgh	State PA	Zip Code 15202
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Requested	Occupation Requested	Aggregate Year-to-Date ▼ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Janet Brown-Liberman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014
Mailing Address 528 Lake Sherwood DR		Transaction ID : 4236461
City Lake Sherwood	State CA	Zip Code 91361
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Requested	Occupation Requested Homemaker	Aggregate Year-to-Date ▼ 575.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Elisabeth Brownstein		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 21 / 2014
Mailing Address 5319 Manning Pl. N.W.		Transaction ID : 4239382
City Washington	State DC	Zip Code 20016
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Requested None	Occupation Requested None	Aggregate Year-to-Date ▼ 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 199 OF 2648
	<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)
EMILY's List

A. Ms. Laura Brownstein
Full Name (Last, First, Middle Initial)

Mailing Address 8154 Stirling Falls Cir.

City Sarasota	State FL	Zip Code 34243
------------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y
12	/	02	/	2014

Transaction ID : 4231457

Amount of Each Receipt this Period
100.00

B. Ms. Carol Brownstein
Full Name (Last, First, Middle Initial)

Mailing Address 2209 Commonwealth St

City Houston	State TX	Zip Code 77006
-----------------	-------------	-------------------

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

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

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
12	/	05	/	2014

Transaction ID : 4232689

Amount of Each Receipt this Period
25.00

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

Mailing Address 11001 Maple Grove

City Oklahoma City	State OK	Zip Code 73120
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FEC ID number of contributing federal political committee. **C**

Name of Employer Casady School	Occupation It Director
-----------------------------------	---------------------------

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
11	/	28	/	2014

Transaction ID : 4228546

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 200 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Larry Bruce
Full Name (Last, First, Middle Initial)
Mailing Address 11001 Maple Grove

City Oklahoma City	State OK	Zip Code 73120
-----------------------	-------------	-------------------

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

Name of Employer Casady School	Occupation It Director
-----------------------------------	---------------------------

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
12	/	13	/	2014

Transaction ID : 4236078

Amount of Each Receipt this Period
10.00

B. Larry Bruce
Full Name (Last, First, Middle Initial)
Mailing Address 11001 Maple Grove

City Oklahoma City	State OK	Zip Code 73120
-----------------------	-------------	-------------------

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

Name of Employer Casady School	Occupation It Director
-----------------------------------	---------------------------

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
12	/	28	/	2014

Transaction ID : 4241348

Amount of Each Receipt this Period
10.00

C. Ms. Laura D. Bruce
Full Name (Last, First, Middle Initial)
Mailing Address 5321 W 72nd St

City Prairie Village	State KS	Zip Code 66208
-------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : 4243404

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....▶	35.00
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 201 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Martine Bruel		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2014
Mailing Address 35 William Street		Transaction ID : 4238300
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Full Name (Last, First, Middle Initial) B. Ms. Joanne E. Bruggemann		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014
Mailing Address 3 Lido Circle		Transaction ID : 4229774
City Redwood City	State CA	Zip Code 94065
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) C. Ms. Joanne E. Bruggemann		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014
Mailing Address 3 Lido Circle		Transaction ID : 4240809
City Redwood City	State CA	Zip Code 94065
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 202 OF 2648
	<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)
EMILY's List

A. Ms. Joanne E. Bruggemann
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Lido Circle
 City Redwood City State CA Zip Code 94065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230947
 Amount of Each Receipt this Period
 1200.00

B. Ms. Charlotte Bruhn
 Full Name (Last, First, Middle Initial)
 Mailing Address 51 Scarlet Oak Cir
 City Oxford State OH Zip Code 45056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237750
 Amount of Each Receipt this Period
 30.00

C. Ms. Sandra E. Bruns
 Full Name (Last, First, Middle Initial)
 Mailing Address 1111 Leavenworth Street
 City Omaha State NE Zip Code 68102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Db a Bruns Graphics-Art To Go Occupation Artist/Community Volunteer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238435
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	1245.00
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 203 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Julianne Bruska
Full Name (Last, First, Middle Initial)
Mailing Address 2847 N. Neenah Ave.
City Chicago State IL Zip Code 60634
FEC ID number of contributing federal political committee. **C**
Name of Employer Chicago Public Schools Occupation Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 30 / 2014
Transaction ID : 4243077
Amount of Each Receipt this Period
25.00

B. Sandra Bryson
Full Name (Last, First, Middle Initial)
Mailing Address 3117 Lewiston Ave
City Berkeley State CA Zip Code 94705
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Psychotherapist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228548
Amount of Each Receipt this Period
25.00

C. Sandra Bryson
Full Name (Last, First, Middle Initial)
Mailing Address 3117 Lewiston Ave
City Berkeley State CA Zip Code 94705
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Psychotherapist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241911
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 204 OF 2648
	<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)
EMILY's List

A. Ms. Alice R. Buchanan
Full Name (Last, First, Middle Initial)

Mailing Address 44 Daffodil Lane

City Verona State PA Zip Code 15147

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

Name of Employer Requested Occupation Requested

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
 12 / 04 / 2014

Transaction ID : 4232258

Amount of Each Receipt this Period
 500.00

B. Ms. Louisa F. Buck
Full Name (Last, First, Middle Initial)

Mailing Address 1086 N. Seminary St.

City Galesburg State IL Zip Code 61401

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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014

Transaction ID : 4233251

Amount of Each Receipt this Period
 50.00

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

Mailing Address 818 E. Osborn Road, Ste. 107

City Phoenix State AZ Zip Code 85014

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

Name of Employer Buckman Psychological Consultants, PII Occupation Psychologist

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 / 27 / 2014

Transaction ID : 4230204

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	575.00
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 205 OF 2648
	<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)
EMILY's List

A. Lindsey Buckman
Full Name (Last, First, Middle Initial)

Mailing Address 818 E. Osborn Road, Ste. 107

City Phoenix State AZ Zip Code 85014

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

Name of Employer Buckman Psychological Consultants, PLLC Occupation Psychologist

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
 12 / 27 / 2014

Transaction ID : 4244921

Amount of Each Receipt this Period
 25.00

B. Mr. John J. Budin
Full Name (Last, First, Middle Initial)

Mailing Address 403 E Hawthorne St.

City Arlington Heights State IL Zip Code 60004

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

Name of Employer Self Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4239656

Amount of Each Receipt this Period
 75.00

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

Mailing Address 6109 Petaluma Dr

City Boca Raton State FL Zip Code 33433

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 326.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : 4237178

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

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 206 OF 2648
	<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)
EMILY's List

A. Henry Buery
Full Name (Last, First, Middle Initial)

Mailing Address 6109 Petaluma Dr

City Boca Raton State FL Zip Code 33433

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **326.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240889

Amount of Each Receipt this Period
10.00

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

Mailing Address 6410 Spanish Earth

City San Antonio State TX Zip Code 78233

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237117

Amount of Each Receipt this Period
20.00

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

Mailing Address 22 Corthell Rd

City North Billerica State MA Zip Code 01862

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

Name of Employer Tibco Software Occupation Software Technical Support Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231779

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **55.00**

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 207 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Cheri A. Buker
 Full Name (Last, First, Middle Initial)
 Mailing Address 5516 South Wayne Av
 City Fort Wayne State IN Zip Code 46807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer British Telecom Occupation Global Network Service Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231683
 Amount of Each Receipt this Period
 20.00

B. Mrs. Margaret B. Bunce
 Full Name (Last, First, Middle Initial)
 Mailing Address 1970 Silverleaf Cir Unit 326
 City Carlsbad State CA Zip Code 92009
 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 ▼ 2500.00

Date of Receipt
 12 / 29 / 2014
Transaction ID : 4242470
 Amount of Each Receipt this Period
 500.00

C. Curtis E. Burger
 Full Name (Last, First, Middle Initial)
 Mailing Address 29514 Us Highway 69
 City Huxley State IA Zip Code 50124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 12 / 23 / 2014
Transaction ID : 4239738
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.00
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 208 OF 2648
	<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)
EMILY's List

A. Mr. Matthew Burgess
Full Name (Last, First, Middle Initial)

Mailing Address 415 Oak Grove St Apt 212

City	State	Zip Code
Minneapolis	MN	55403

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

Name of Employer	Occupation
Al Franken For Senate 2014	Campaign Manager

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
12	/	15	/	2014

Transaction ID : 4236800

Amount of Each Receipt this Period

250.00

B. Ms. Amy Burgess
Full Name (Last, First, Middle Initial)

Mailing Address 325 Wilkinson St., Apt. 315

City	State	Zip Code
Chelsea	MI	48118

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 ▼ 210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2014

Transaction ID : 4239079

Amount of Each Receipt this Period

20.00

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

Mailing Address 7783 Fairfield Rd

City	State	Zip Code
Oxford	OH	45056

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

Name of Employer	Occupation
Miami University	Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4231659

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional).....▶	290.00
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 209 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Linda Burke		Date of Receipt
Mailing Address 2908 Mosby St		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Alexandria	State VA	Zip Code 22305
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4227834
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 ▼ <input type="text" value="270.00"/>	
		Amount of Each Receipt this Period <input type="text" value="15.00"/>

Full Name (Last, First, Middle Initial) B. Linda Burke		Date of Receipt
Mailing Address 2908 Mosby St		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City Alexandria	State VA	Zip Code 22305
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4237107
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 ▼ <input type="text" value="270.00"/>	
		Amount of Each Receipt this Period <input type="text" value="15.00"/>

Full Name (Last, First, Middle Initial) C. Linda Burke		Date of Receipt
Mailing Address 2908 Mosby St		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Alexandria	State VA	Zip Code 22305
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4240688
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 ▼ <input type="text" value="270.00"/>	
		Amount of Each Receipt this Period <input type="text" value="15.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 210 OF 2648
(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)
EMILY's List

A. Ms. Kathleen J. Burke
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 Blackfield Drive
 City Tiburon State CA Zip Code 94920
 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 ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228553
 Amount of Each Receipt this Period
 150.00

B. Ms. Kathleen J. Burke
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 Blackfield Drive
 City Tiburon State CA Zip Code 94920
 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 ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241912
 Amount of Each Receipt this Period
 150.00

C. Connie Burkhardt
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Huntleigh Downs
 City Frontenac State MO Zip Code 63131
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234077
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
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 211 OF 2648
(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)
EMILY's List

A. Dr. Robin Burks
 Full Name (Last, First, Middle Initial)
 Mailing Address 950 Echo Ln Ste 335
 City Houston State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Clinical Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230320
 Amount of Each Receipt this Period
 75.00

B. Mary Margaret Burnette
 Full Name (Last, First, Middle Initial)
 Mailing Address 2721 Wheat St
 City Columbia State SC Zip Code 29205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Na Occupation Disabled
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239739
 Amount of Each Receipt this Period
 20.00

C. William Burns
 Full Name (Last, First, Middle Initial)
 Mailing Address 13557penfield Point
 City San Diego State CA Zip Code 92130
 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 ▼ 271.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239740
 Amount of Each Receipt this Period
 5.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 212 OF 2648
	<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)
EMILY's List

A. Ms. Rae Burns
Full Name (Last, First, Middle Initial)
Mailing Address 3156 Gracefield Rd., Apt. 221

City Silver Spring	State MD	Zip Code 20904
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
12 / 10 / 2014
Transaction ID : 4234573

Amount of Each Receipt this Period
500.00

B. August Burns
Full Name (Last, First, Middle Initial)
Mailing Address 107 N. Bear Swamp Rd

City Worcester	State VT	Zip Code 05682
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Date of Receipt
12 / 24 / 2014
Transaction ID : 4240269

Amount of Each Receipt this Period
250.00

C. Devon Burr
Full Name (Last, First, Middle Initial)
Mailing Address 4011 Whitlow Ave

City Knoxville	State TN	Zip Code 37919
FEC ID number of contributing federal political committee. C		
Name of Employer Univ of TN	Occupation Univ Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232765

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	310.00
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 213 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Sharon Burrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 8201 River Run Dr
 City Bowie State MD Zip Code 20715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228556
 Amount of Each Receipt this Period
 25.00

B. Sharon Burrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 8201 River Run Dr
 City Bowie State MD Zip Code 20715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241914
 Amount of Each Receipt this Period
 25.00

C. Donald Burrill
 Full Name (Last, First, Middle Initial)
 Mailing Address 1224 Stratford Ave
 City South Pasadena State CA Zip Code 91030
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232337
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 214 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Don Busby		Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227836
Mailing Address 6005 Tasajillo Trail		Amount of Each Receipt this Period 20.00
City Austin	State TX	Zip Code 78739
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Business Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Don Busby		Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240731
Mailing Address 6005 Tasajillo Trail		Amount of Each Receipt this Period 20.00
City Austin	State TX	Zip Code 78739
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Business Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Michael Bush		Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236171
Mailing Address 170 W Cliff Dr 64		Amount of Each Receipt this Period 50.00
City Santa Cruz	State CA	Zip Code 95060
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 ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 215 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Mary E. Bussey		Date of Receipt M M M / D D D / Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228557
Mailing Address 81 Wallentine Road		Amount of Each Receipt this Period 10.00
City Bowdoinham	State ME	Zip Code 04008
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation None		Aggregate Year-to-Date ▼ 210.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Mary E. Bussey		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241410
Mailing Address 81 Wallentine Road		Amount of Each Receipt this Period 10.00
City Bowdoinham	State ME	Zip Code 04008
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation None		Aggregate Year-to-Date ▼ 210.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Edna Joyce Bussler		Date of Receipt M M M / D D D / Y Y Y Y Y 11 / 27 / 2014 Transaction ID : 4228319
Mailing Address 800 Lake Port Blvd, Apt H503		Amount of Each Receipt this Period 15.00
City Leesburg	State FL	Zip Code 34748
FEC ID number of contributing federal political committee. C	Name of Employer Requested	
Occupation Requested		Aggregate Year-to-Date ▼ 436.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	35.00
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 216 OF 2648
	<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)
EMILY's List

A. Edna Joyce Bussler
Full Name (Last, First, Middle Initial)

Mailing Address 800 Lake Port Blvd, Apt H503

City Leesburg State FL Zip Code 34748

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 436.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230072

Amount of Each Receipt this Period
 15.00

B. Edna Joyce Bussler
Full Name (Last, First, Middle Initial)

Mailing Address 800 Lake Port Blvd, Apt H503

City Leesburg State FL Zip Code 34748

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 436.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240702

Amount of Each Receipt this Period
 15.00

C. Edna Joyce Bussler
Full Name (Last, First, Middle Initial)

Mailing Address 800 Lake Port Blvd, Apt H503

City Leesburg State FL Zip Code 34748

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 436.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241163

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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 217 OF 2648
	<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)
EMILY's List

A. Ann Butler
Full Name (Last, First, Middle Initial)
Mailing Address 2623 Sutton Court
City Houston State TX Zip Code 77027
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2014
Transaction ID : 4236818
Amount of Each Receipt this Period 50.00

B. Ashley Butler
Full Name (Last, First, Middle Initial)
Mailing Address 8014 Collingwood Ct
City University Park State FL Zip Code 34201
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 466.66

Date of Receipt 11 / 29 / 2014
Transaction ID : 4229482
Amount of Each Receipt this Period 50.00

C. Ms. Susan R. Butler
Full Name (Last, First, Middle Initial)
Mailing Address 69366 Lariat
City Sisters State OR Zip Code 97759
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Association Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 12 / 10 / 2014
Transaction ID : 4234606
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 218 OF 2648
	<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)
EMILY's List

A. Ms. Susan R. Butler
Full Name (Last, First, Middle Initial)
Mailing Address 69366 Lariat
City Sisters State OR Zip Code 97759
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Association Management
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **220.00**

Date of Receipt
12 / 12 / 2014
Transaction ID : 4235962
Amount of Each Receipt this Period
10.00

B. Ruth Butler
Full Name (Last, First, Middle Initial)
Mailing Address 975 MEMORIAL DR APT 209
City Cambridge State MA Zip Code 02138
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234321
Amount of Each Receipt this Period
150.00

C. Ms. Colleen Palmer Button
Full Name (Last, First, Middle Initial)
Mailing Address 1518 Stuart Road
City Herndon State VA Zip Code 20170
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 **450.00**

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231686
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... **180.00**
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 219 OF 2648
	<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)
EMILY's List

A. Ms. Rosalie W. Byard
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 Plaza Street East
 City Brooklyn State NY Zip Code 11238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Teacher/Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4232065
 Amount of Each Receipt this Period 15.00

B. Mrs. Phyllis E. Byers
 Full Name (Last, First, Middle Initial)
 Mailing Address 12600 Parkwood Dr Apt 305 Apt. 305
 City Burnsville State MN Zip Code 55337
 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 ▼ 350.00

Date of Receipt 12 / 02 / 2014
Transaction ID : 4230952
 Amount of Each Receipt this Period 100.00

C. Virginia Byrd
 Full Name (Last, First, Middle Initial)
 Mailing Address 338 11th Avenue
 City Salt Lake City State UT Zip Code 84103
 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 ▼ 300.00

Date of Receipt 12 / 23 / 2014
Transaction ID : 4239741
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 220 OF 2648
	<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)
EMILY's List

A. Alpha Byrns
Full Name (Last, First, Middle Initial)
Mailing Address 30 Peregrine Dr

City Boise	State ID	Zip Code 83716
---------------	-------------	-------------------

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

Name of Employer Ada County	Occupation Bailiff
--------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4230175

Amount of Each Receipt this Period
50.00

B. Alpha Byrns
Full Name (Last, First, Middle Initial)
Mailing Address 30 Peregrine Dr

City Boise	State ID	Zip Code 83716
---------------	-------------	-------------------

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

Name of Employer Ada County	Occupation Bailiff
--------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240841

Amount of Each Receipt this Period
50.00

C. Ms. Judy Byrns
Full Name (Last, First, Middle Initial)
Mailing Address 13935 N. 1st Street

City Raymond	State NE	Zip Code 68428
-----------------	-------------	-------------------

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

Name of Employer Lincoln Behavioral Health Clinic	Occupation Psychologist
--	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	30	/	2014

Transaction ID : 4243048

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 221 OF 2648
	(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)
EMILY's List

A. Ms. Helen Cable
Full Name (Last, First, Middle Initial)
Mailing Address Hc 3 Box 3921

City Greenville	State MO	Zip Code 63944
--------------------	-------------	-------------------

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 ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230324

Amount of Each Receipt this Period

75.00

B. Ms. Mary R. Cafiero
Full Name (Last, First, Middle Initial)
Mailing Address 1731 Fulton St.

City Palo Alto	State CA	Zip Code 94303
-------------------	-------------	-------------------

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

Name of Employer Requested	Occupation Volunteer
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	29	/	2014

Transaction ID : 4242475

Amount of Each Receipt this Period

500.00

C. Ms. Irene Cairo
Full Name (Last, First, Middle Initial)
Mailing Address 27 West 86th St

City New York	State NY	Zip Code 10024
------------------	-------------	-------------------

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

Name of Employer Self	Occupation Psychoanalyst (M.D).
--------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **890.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	11	/	2014

Transaction ID : 4234972

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional).....▶	595.00
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 222 OF 2648
	<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)
EMILY's List

A. David Calabro
Full Name (Last, First, Middle Initial)

Mailing Address 1584 Mountaintop Rd.

City State Zip Code
Bridgewater NJ 08807

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

Name of Employer Occupation
Exxonmobil Chemist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014
Transaction ID : 4238443

Amount of Each Receipt this Period
35.00

B. Ms. Judy Calder
Full Name (Last, First, Middle Initial)

Mailing Address 3053 W 8750 S

City State Zip Code
West Jordan UT 84088

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

Name of Employer Occupation
Salt Lake Community College Administrative Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2014
Transaction ID : 4239189

Amount of Each Receipt this Period
30.00

C. Ms. Esther Caldwell
Full Name (Last, First, Middle Initial)

Mailing Address 568 Beach 131st St
Beach 131st St

City State Zip Code
Belle Harbor NY 11694

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 ▼
220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014
Transaction ID : 4236603

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 223 OF 2648
	<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)
EMILY's List

A. Mr. Timothy Caldwell
Full Name (Last, First, Middle Initial)

Mailing Address 2020 S. Mission, #135

City Mount Pleasant	State MI	Zip Code 48858
------------------------	-------------	-------------------

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

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

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
11	/	28	/	2014

Transaction ID : 4228562

Amount of Each Receipt this Period
15.00

B. Mr. Timothy Caldwell
Full Name (Last, First, Middle Initial)

Mailing Address 2020 S. Mission, #135

City Mount Pleasant	State MI	Zip Code 48858
------------------------	-------------	-------------------

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

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

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
12	/	28	/	2014

Transaction ID : 4241917

Amount of Each Receipt this Period
15.00

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

Mailing Address 1520 Legacy Trl

City Elizabeth	State CO	Zip Code 80107
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	10	/	2014

Transaction ID : 4234416

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 224 OF 2648
	<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)
EMILY's List

A. Ms. Carol Callaghan
Full Name (Last, First, Middle Initial)
Mailing Address 3802 Waverly Hills Rd
City Lansing State MI Zip Code 48917
FEC ID number of contributing federal political committee. **C**
Name of Employer State Of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228564
Amount of Each Receipt this Period
100.00

B. Ms. Carol Callaghan
Full Name (Last, First, Middle Initial)
Mailing Address 3802 Waverly Hills Rd
City Lansing State MI Zip Code 48917
FEC ID number of contributing federal political committee. **C**
Name of Employer State Of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241358
Amount of Each Receipt this Period
100.00

C. Donald Callihan
Full Name (Last, First, Middle Initial)
Mailing Address 10628 Partridge Lane
City Cockeysville State MD Zip Code 21030
FEC ID number of contributing federal political committee. **C**
Name of Employer Alliance Biosciences Occupation Microbiologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2014
Transaction ID : 4228259
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	210.00
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 225 OF 2648
	<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)
EMILY's List

A. Donald Callihan
Full Name (Last, First, Middle Initial)

Mailing Address 10628 Partridge Lane

City State Zip Code
Cockeysville MD 21030

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

Name of Employer Occupation
Alliance Biosciences Microbiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2014

Transaction ID : 4241124

Amount of Each Receipt this Period
10.00

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

Mailing Address 10628 Partridge Lane

City State Zip Code
Cockeysville MD 21030

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

Name of Employer Occupation
Alliance Biosciences Microbiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 09 / 2014

Transaction ID : 4234091

Amount of Each Receipt this Period
30.00

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

Mailing Address 2476 Sunset Drive

City State Zip Code
Ventura CA 93001

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014

Transaction ID : 4238445

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00

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 226 OF 2648
	<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)
EMILY's List

A. Rebecca Calzia-Bhatt
Full Name (Last, First, Middle Initial)
Mailing Address 1671 Saint Norbert Dr.
City Danville State CA Zip Code 94526
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228567
Amount of Each Receipt this Period
75.00

B. Rebecca Calzia-Bhatt
Full Name (Last, First, Middle Initial)
Mailing Address 1671 Saint Norbert Dr.
City Danville State CA Zip Code 94526
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241411
Amount of Each Receipt this Period
75.00

C. Greg Camacho
Full Name (Last, First, Middle Initial)
Mailing Address 8303 Fort Sumter Rd
City Austin State TX Zip Code 78745
FEC ID number of contributing federal political committee. **C**
Name of Employer Freescale Semiconductor Occupation Technical Writer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240917
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 227 OF 2648
	<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)
EMILY's List

A. Armando Camarena
Full Name (Last, First, Middle Initial)

Mailing Address 1912 N Wilson Ave

City Upland State CA Zip Code 91784

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

Name of Employer Us Auctions Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **11 / 30 / 2014**

Transaction ID : 4229628

Amount of Each Receipt this Period **100.00**

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

Mailing Address 1912 N Wilson Ave

City Upland State CA Zip Code 91784

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

Name of Employer Us Auctions Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **12 / 28 / 2014**

Transaction ID : 4241618

Amount of Each Receipt this Period **100.00**

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

Mailing Address 184 Bayview St.

City Camden State ME Zip Code 04843

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

Name of Employer None Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **238.00**

Date of Receipt **12 / 08 / 2014**

Transaction ID : 4233172

Amount of Each Receipt this Period **53.00**

SUBTOTAL of Receipts This Page (optional)..... **253.00**

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 228 OF 2648
	<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)
EMILY's List

A. Ms. Mary Lyman Cammann
Full Name (Last, First, Middle Initial)
Mailing Address 1711 SE 41st Ave

City Portland	State OR	Zip Code 97214
------------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230328

Amount of Each Receipt this Period
75.00

B. Mrs. Eva Camp
Full Name (Last, First, Middle Initial)
Mailing Address 98 Sea View Avenue

City Piedmont	State CA	Zip Code 94611
------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Investor
-------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2014

Transaction ID : 4236969

Amount of Each Receipt this Period
1000.00

C. Elizabeth Campbell
Full Name (Last, First, Middle Initial)
Mailing Address 3014 Ravensport

City Pearland	State TX	Zip Code 77584
------------------	-------------	-------------------

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

Name of Employer Andrews Kurth Llp	Occupation Attorney
---------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2014

Transaction ID : 4237288

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
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 229 OF 2648
	<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)
EMILY's List

A. Vada Campbell
Full Name (Last, First, Middle Initial)

Mailing Address 455 9th St NE
Unit 8

City East Wenatchee State WA Zip Code 98802

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 4228569

Amount of Each Receipt this Period
25.00

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

Mailing Address 455 9th St NE
Unit 8

City East Wenatchee State WA Zip Code 98802

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014

Transaction ID : 4241414

Amount of Each Receipt this Period
25.00

C. Ms. Wendy U. Campbell
Full Name (Last, First, Middle Initial)

Mailing Address 9169 Stonegarden Dr

City Lorton State VA Zip Code 22079

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014

Transaction ID : 4232860

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00

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 230 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Cristina Campbell

Mailing Address 3108 Claremont Ave

City State Zip Code
Berkeley CA 94705

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 ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236824

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Mr. Lewis M. Campbell

Mailing Address 1695 18th St

City State Zip Code
San Francisco CA 94107

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 ▼
695.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227838

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Mr. Lewis M. Campbell

Mailing Address 1695 18th St

City State Zip Code
San Francisco CA 94107

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 ▼
695.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229674

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 231 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Lewis M. Campbell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1695 18th St
 City San Francisco State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 695.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240751
 Amount of Each Receipt this Period
 25.00

B. Mr. Lewis M. Campbell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1695 18th St
 City San Francisco State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 695.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240758
 Amount of Each Receipt this Period
 25.00

C. Ms. Phyllis K. Campbell
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Piper Rd Apt K104
 City Scarborough State ME Zip Code 04074
 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 ▼ 509.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4230954
 Amount of Each Receipt this Period
 57.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 107.00
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 232 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Judith Campbell
Full Name (Last, First, Middle Initial)

Mailing Address 300 West Beech #1408

City San Diego State CA Zip Code 92101

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2014

Transaction ID : 4244908

Amount of Each Receipt this Period
 35.00

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

Mailing Address 21 Park Ave.

City Westerly State RI Zip Code 02891

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

Name of Employer Self Occupation Musician, Teacher, Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : 4238448

Amount of Each Receipt this Period
 20.00

c. Ms. Annabel C. Caner
Full Name (Last, First, Middle Initial)

Mailing Address 3 Southdown Ct

City Huntington State NY Zip Code 11743

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237897

Amount of Each Receipt this Period
 31.00

SUBTOTAL of Receipts This Page (optional).....▶	86.00
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 233 OF 2648
	<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

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)
EMILY's List

A. Mr. Bret Cannon
Full Name (Last, First, Middle Initial)

Mailing Address 2227 Carriage Ave

City Richland State WA Zip Code 99354

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

Name of Employer Battelle Northwest Occupation Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238449

Amount of Each Receipt this Period
 15.00

B. Ms. Margaret Jean Cannon
Full Name (Last, First, Middle Initial)

Mailing Address 548b Beach Road

City Sarasota State FL Zip Code 34242

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234887

Amount of Each Receipt this Period
 20.00

C. Ms. Margaret Jean Cannon
Full Name (Last, First, Middle Initial)

Mailing Address 548b Beach Road

City Sarasota State FL Zip Code 34242

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227839

Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 234 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marsha Brady Cannon		Date of Receipt
Mailing Address 143 Crabtree Rd		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City Quincy	State MA	Zip Code 02171
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4228267
Name of Employer Tannet Cos		Amount of Each Receipt this Period
Occupation Wardrobe Consultant		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="300.00"/>		

Full Name (Last, First, Middle Initial) B. Ms. Marsha Brady Cannon		Date of Receipt
Mailing Address 143 Crabtree Rd		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City Quincy	State MA	Zip Code 02171
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4241130
Name of Employer Tannet Cos		Amount of Each Receipt this Period
Occupation Wardrobe Consultant		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="300.00"/>		

Full Name (Last, First, Middle Initial) C. Ms. Marsha Brady Cannon		Date of Receipt
Mailing Address 143 Crabtree Rd		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City Quincy	State MA	Zip Code 02171
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4233998
Name of Employer Tannet Cos		Amount of Each Receipt this Period
Occupation Wardrobe Consultant		<input type="text" value="15.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="300.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="35.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 235 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Thomasina H. Canty		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232144		
Mailing Address 416 McPherson Avenue		Amount of Each Receipt this Period 55.00		
City Lansing	State MI	Zip Code 48915	Aggregate Year-to-Date ▼ 685.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Requested			

Full Name (Last, First, Middle Initial) B. Ms. Bonita W. Caplan		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239586		
Mailing Address 1 Stratford Ct		Amount of Each Receipt this Period 125.00		
City Beachwood	State OH	Zip Code 44122	Aggregate Year-to-Date ▼ 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Requested Counselor			

Full Name (Last, First, Middle Initial) C. Ms. Lorraine E. Caputo		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 12 / 2014 Transaction ID : 4236042		
Mailing Address 7 Sunset Terrace		Amount of Each Receipt this Period 50.00		
City Maplewood	State NJ	Zip Code 07040	Aggregate Year-to-Date ▼ 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Requested Psychoanalyst			

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	230.00

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

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

FOR LINE NUMBER: PAGE 236 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Randi Cardia
 Full Name (Last, First, Middle Initial)
 Mailing Address 666 Greenwich St Apt 804
 City New York State NY Zip Code 10014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227840
 Amount of Each Receipt this Period
 35.00

B. Ms. Shoshana Cardin
 Full Name (Last, First, Middle Initial)
 Mailing Address 3624 Anton Farms Rd.
 City Pikesville State MD Zip Code 21208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234259
 Amount of Each Receipt this Period
 10.00

C. Alex Cardinell
 Full Name (Last, First, Middle Initial)
 Mailing Address 3721 Baugh Street
 City Raleigh State NC Zip Code 27604
 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 ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235479
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 237 OF 2648
	<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)
EMILY's List

A. Mrs. Juanita L. Carl
Full Name (Last, First, Middle Initial)

Mailing Address 360 High St

City Belfast State ME Zip Code 04915

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 ▼ **313.75**

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232812

Amount of Each Receipt this Period
15.00

B. Ms. Elizabeth A. Carlin
Full Name (Last, First, Middle Initial)

Mailing Address Post Office Box 750

City Point Reyes Station State CA Zip Code 94956

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 ▼ **900.00**

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231625

Amount of Each Receipt this Period
100.00

C. Ms. Andrea S. Carlise
Full Name (Last, First, Middle Initial)

Mailing Address 2835 Johnson Ave.

City Alameda State CA Zip Code 94501

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

Name of Employer Patton Wolan Carlise Llp Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1830.00**

Date of Receipt
12 / 28 / 2014
Transaction ID : 4241232

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **165.00**

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 238 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Andrea S. Carlise		Date of Receipt
Mailing Address 2835 Johnson Ave.		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Alameda	CA	94501
FEC ID number of contributing federal political committee.		Transaction ID : 4244849
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="85.00"/>
Name of Employer	Occupation	
Patton Wolan Carlise Llp	Attorney	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1830.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Linda K. Carlisle		Date of Receipt
Mailing Address 233 Fisher Ave.		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
Brookline	MA	02445
FEC ID number of contributing federal political committee.		Transaction ID : 4242649
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	Occupation	
Self	Consultant	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Patricia Carlton		Date of Receipt
Mailing Address 500 Rodeo Rd.		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Santa Fe	NM	87505
FEC ID number of contributing federal political committee.		Transaction ID : 4236767
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="35.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="480.16"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="620.00"/>
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: (check only one)	PAGE 239 OF 2648
	<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)
EMILY's List

A. Mr. William A. Carmell
Full Name (Last, First, Middle Initial)

Mailing Address 11 Highwood Lane

City Westport State CT Zip Code 06880

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

Name of Employer Ford & Harrison LLP Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014

Transaction ID : 4230957

Amount of Each Receipt this Period
250.00

B. Mrs. Walta W Carmichael
Full Name (Last, First, Middle Initial)

Mailing Address 15317 Stoney Spring Rd.

City Edmond State OK Zip Code 73013

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 ▼ **570.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4239744

Amount of Each Receipt this Period
10.00

C. Mrs. Walta W Carmichael
Full Name (Last, First, Middle Initial)

Mailing Address 15317 Stoney Spring Rd.

City Edmond State OK Zip Code 73013

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 ▼ **570.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014

Transaction ID : 4234289

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **360.00**

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 240 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Heidi Carney

Mailing Address 411 Queenstown Road

City State Zip Code
Severn MD 21144

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

Name of Employer Occupation
True Citrus Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239745

Amount of Each Receipt this Period
50.00

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

Mailing Address 16383 Lilac Ln

City State Zip Code
Los Gatos CA 95032

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 ▼
267.50

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243551

Amount of Each Receipt this Period
10.00

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

Mailing Address 16383 Lilac Ln

City State Zip Code
Los Gatos CA 95032

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 ▼
267.50

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230251

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

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 241 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jane Carr		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234492
Mailing Address 660 Gran Heritage Way		Amount of Each Receipt this Period 20.00
City Dacula	State GA	Zip Code 30019
FEC ID number of contributing federal political committee. C		
Name of Employer Gwinnett Clinic	Occupation Family Nurse Practitioner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Karen Carr		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234098
Mailing Address P. O. Box 1384		Amount of Each Receipt this Period 25.00
City Ingleside	State TX	Zip Code 78362
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 ▼ 215.00	

Full Name (Last, First, Middle Initial) C. Maryann Carr		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233074
Mailing Address PO Box 815		Amount of Each Receipt this Period 100.00
City Glen Ellen	State CA	Zip Code 95442
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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 242 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Thomas Carroll		Date of Receipt 12 / 09 / 2014 Transaction ID : 4234282
Mailing Address 1006 S Glenview Dr		Amount of Each Receipt this Period 300.00
City Carbondale	State IL	Zip Code 62901
FEC ID number of contributing federal political committee. C		
Name of Employer John A Logan College	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.00	

Full Name (Last, First, Middle Initial) B. Ms. Ellen Carter		Date of Receipt 12 / 12 / 2014 Transaction ID : 4236027
Mailing Address 1662 Snowmass Way		Amount of Each Receipt this Period 200.00
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		
Name of Employer Blue Cross And Blue Shield Of Nc	Occupation Business Intelligence Developer/Analys	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Ms. Kathleen Carter		Date of Receipt 12 / 10 / 2014 Transaction ID : 4234510
Mailing Address 288 Todd Avenue		Amount of Each Receipt this Period 50.00
City Sonoma	State CA	Zip Code 95476
FEC ID number of contributing federal political committee. C		
Name of Employer Carter, Carter & Carter, Inc.	Occupation Technical Writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 243 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Virginia L. Carter		Date of Receipt
Mailing Address 111 Via La Circula		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City State Zip Code Redondo Beach CA 90277		Transaction ID : 4233834
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Patricia Y. Carter		Date of Receipt
Mailing Address 12042 SE Sunnyside Rd. #505		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Clackamas OR 97015		Transaction ID : 4227842
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="35.00"/>
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 ▼ <input type="text" value="420.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Patricia Y. Carter		Date of Receipt
Mailing Address 12042 SE Sunnyside Rd. #505		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Clackamas OR 97015		Transaction ID : 4240816
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="35.00"/>
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 ▼ <input type="text" value="420.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="220.00"/>
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: (check only one)	PAGE 244 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith M. Carter-Sanford		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014
Mailing Address 7024 Bradwood Ct.		Transaction ID : 4239746
City Springfield	State VA	Zip Code 22151
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Ms. Kevin A. Cartwright		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 18 / 2014
Mailing Address 3511 Greenfield Place		Transaction ID : 4238130
City Carmel	State CA	Zip Code 93923
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2150.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary Cartwright		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014
Mailing Address 1715 Norris Dr		Transaction ID : 4232849
City Austin	State TX	Zip Code 78704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Self	Occupation Psychotherapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

SUBTOTAL of Receipts This Page (optional).....▶	1245.00
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 245 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Helena Carty

Mailing Address 1514 Kingsgate Dr.

City Sunnyvale State CA Zip Code 94087

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **370.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : 4238335

Amount of Each Receipt this Period
100.00

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

Mailing Address 242 S Washington Blvd #296

City Sarasota State FL Zip Code 34236

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **590.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2014
Transaction ID : 4239377

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Ms. Beverly Casazza

Mailing Address 317 Prune Tree Dr.

City Healdsburg State CA Zip Code 95448

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

Name of Employer REQUESTED Occupation REQUESTED

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
 11 / 25 / 2014
Transaction ID : 4227450

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **250.00**

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 246 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Bettye Case		Date of Receipt
Mailing Address 2408 Perez Ave.		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City Tallahassee	State FL	Zip Code 32304
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4231676
Name of Employer Florida State University		Occupation Emerita Mathematics Professor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	
		Amount of Each Receipt this Period <input type="text" value="10.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Bettye Case		Date of Receipt
Mailing Address 2408 Perez Ave.		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City Tallahassee	State FL	Zip Code 32304
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4234893
Name of Employer Florida State University		Occupation Emerita Mathematics Professor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	
		Amount of Each Receipt this Period <input type="text" value="10.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Angela Case		Date of Receipt
Mailing Address 3397 Sentinel Dr		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City Boulder	State CO	Zip Code 80301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4236696
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 ▼ <input type="text" value="390.00"/>	
		Amount of Each Receipt this Period <input type="text" value="20.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="40.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 247 OF 2648
	<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)
EMILY's List

A. Ms. Jessie Case
Full Name (Last, First, Middle Initial)
Mailing Address 1109 Collins Rd
City Colorado Springs State CO Zip Code 80920
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt
12 / 11 / 2014
Transaction ID : 4234730
Amount of Each Receipt this Period
125.00

B. Mary Anne Casey
Full Name (Last, First, Middle Initial)
Mailing Address 2101 Saint Albans Street
City Philadelphia State PA Zip Code 19146
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Graphic Designer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt
12 / 28 / 2014
Transaction ID : 4241324
Amount of Each Receipt this Period
1000.00

C. Barbara Casey
Full Name (Last, First, Middle Initial)
Mailing Address 300 64th Ave., Apt. 323
City St Pete Beach State FL Zip Code 33706
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **265.00**

Date of Receipt
12 / 17 / 2014
Transaction ID : 4237899
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... **1140.00**
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 248 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Barbara Casey
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 64th Ave., Apt. 323
 City St Pete Beach State FL Zip Code 33706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 12 / 17 / 2014
Transaction ID : 4237900
 Amount of Each Receipt this Period
 15.00

B. Barbara Casey
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 64th Ave., Apt. 323
 City St Pete Beach State FL Zip Code 33706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 12 / 23 / 2014
Transaction ID : 4239556
 Amount of Each Receipt this Period
 15.00

c. Ms. Jane I. Cash
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Night Heron
 City Stony Brook State NY Zip Code 11790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Accredo Homecare Occupation Rn
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 11 / 28 / 2014
Transaction ID : 4228577
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 249 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jane I. Cash		Date of Receipt
Mailing Address 10 Night Heron		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Stony Brook NY 11790		Transaction ID : 4241781
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Accredo Homecare Rn		<input type="text" value="270.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="270.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Rosanne Cash		Date of Receipt
Mailing Address Haber Corporation 16830 Ventura Blvd., Suite 501		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City State Zip Code Encino CA 91436		Transaction ID : 4238455
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Self Writer		<input type="text" value="900.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="900.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Anne Casscells		Date of Receipt
Mailing Address 735 Nevada Ave		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City State Zip Code San Mateo CA 94402		Transaction ID : 4230331
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Aetos Capital Llc Finance		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="800.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="345.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 250 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Nancy Cassidy

Mailing Address 640 West Fulton C

City Chicago State IL Zip Code 60661

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

Name of Employer Self Occupation Prop Stylist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243181

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Margaret Bernadette Castro

Mailing Address 24 Berenda Way

City Portola Valley State CA Zip Code 94028

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 ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228578

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Margaret Bernadette Castro

Mailing Address 24 Berenda Way

City Portola Valley State CA Zip Code 94028

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 ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241924

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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 251 OF 2648
	<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)
EMILY's List

A. Ms. Elizabeth Catania
Full Name (Last, First, Middle Initial)

Mailing Address 1901 Jacobs Ct.

City Fairfield	State CA	Zip Code 94534
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FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241925

Amount of Each Receipt this Period
60.00

B. Ms. Jean U. Catron
Full Name (Last, First, Middle Initial)

Mailing Address 164 S. Porter Street

City Elgin	State IL	Zip Code 60120
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2014

Transaction ID : 4233310

Amount of Each Receipt this Period
10.00

C. Ms. Jean U. Catron
Full Name (Last, First, Middle Initial)

Mailing Address 164 S. Porter Street

City Elgin	State IL	Zip Code 60120
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4227586

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 252 OF 2648
	<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)
EMILY's List

A. Ms. Linda Cavallero
Full Name (Last, First, Middle Initial)
Mailing Address 18 Independence Lane
City Shrewsbury State MA Zip Code 01545
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241416
Amount of Each Receipt this Period
500.00

B. Ms. Lorraine F. Cecil
Full Name (Last, First, Middle Initial)
Mailing Address 1211 Bixby Ave.
City Bemidji State MN Zip Code 56601
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 25 / 2014
Transaction ID : 4229742
Amount of Each Receipt this Period
10.00

C. Ms. Lorraine F. Cecil
Full Name (Last, First, Middle Initial)
Mailing Address 1211 Bixby Ave.
City Bemidji State MN Zip Code 56601
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240489
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 520.00
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 253 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. James Cerra		Date of Receipt
Mailing Address 838 Chappell Rd.		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Charleston	WV	25304
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4230333
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	Business Owner	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="470.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Susan Chadick		Date of Receipt
Mailing Address 300 Park Avenue		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
New York	NY	10022
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4236572
Name of Employer	Occupation	Amount of Each Receipt this Period
Chadick Ellig	Co-Chief Executive Officer	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="750.00"/>	

Full Name (Last, First, Middle Initial) C. Paul Chadman		Date of Receipt
Mailing Address 132 Glenford Village		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chicora	PA	16025
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4228580
Name of Employer	Occupation	Amount of Each Receipt this Period
Bny Mellon	Account Analyst	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="310.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 254 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Paul Chadman		Date of Receipt M M / D D / Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228581
Mailing Address 132 Glenford Village		Amount of Each Receipt this Period 10.00
City Chicora	State PA	Zip Code 16025
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 220.00
Name of Employer Bny Mellon	Occupation Account Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Paul Chadman		Date of Receipt M M / D D / Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241927
Mailing Address 132 Glenford Village		Amount of Each Receipt this Period 10.00
City Chicora	State PA	Zip Code 16025
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 220.00
Name of Employer Bny Mellon	Occupation Account Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Paul Chadman		Date of Receipt M M / D D / Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241928
Mailing Address 132 Glenford Village		Amount of Each Receipt this Period 10.00
City Chicora	State PA	Zip Code 16025
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 220.00
Name of Employer Bny Mellon	Occupation Account Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 255 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Myron Chadowitz		Date of Receipt
Mailing Address 4830 W Hillside Dr		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Eugene	OR	97405
FEC ID number of contributing federal political committee.		Transaction ID : 4227844
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="390.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Myron Chadowitz		Date of Receipt
Mailing Address 4830 W Hillside Dr		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Eugene	OR	97405
FEC ID number of contributing federal political committee.		Transaction ID : 4240722
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="390.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Maribeth C. Chadwell		Date of Receipt
Mailing Address 2415 Second Ave #629		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Seattle	WA	98121
FEC ID number of contributing federal political committee.		Transaction ID : 4237233
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
None	Retired	
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="160.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 256 OF 2648
	<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)
EMILY's List

A. Ms. Kathleen Chalfant
Full Name (Last, First, Middle Initial)

Mailing Address 273 Hicks St

City Brooklyn State NY Zip Code 11201

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

Name of Employer Free Lance Occupation Actor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : 4243391

Amount of Each Receipt this Period
250.00

B. Ms. Lynn M. Chalupsky
Full Name (Last, First, Middle Initial)

Mailing Address 3009 Puente St.

City Fullerton State CA Zip Code 92835

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

Name of Employer Requested Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237508

Amount of Each Receipt this Period
160.00

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

Mailing Address 913 S Glenview Dr

City Carbondale State IL Zip Code 62901

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014

Transaction ID : 4233540

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	420.00
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 257 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ned Champlain
Full Name (Last, First, Middle Initial)
Mailing Address 812 S. Sterling St.
City State Zip Code
Streator IL 61364
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 ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4229739
Amount of Each Receipt this Period
10.00

B. Ned Champlain
Full Name (Last, First, Middle Initial)
Mailing Address 812 S. Sterling St.
City State Zip Code
Streator IL 61364
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 ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240477
Amount of Each Receipt this Period
10.00

C. Ned Champlain
Full Name (Last, First, Middle Initial)
Mailing Address 812 S. Sterling St.
City State Zip Code
Streator IL 61364
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 ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014
Transaction ID : 4238458
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 35.00
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 258 OF 2648
	<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)
EMILY's List

A. Ms. Marguerite Chandler
Full Name (Last, First, Middle Initial)

Mailing Address 707 E. Lake Drive, PO Box 250
PO Box 250

City Cape May Point State NJ Zip Code 08212

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 ▼
455.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 14 / 2014
Transaction ID : 4235431

Amount of Each Receipt this Period
15.00

B. Ms. Marguerite Chandler
Full Name (Last, First, Middle Initial)

Mailing Address 707 E. Lake Drive, PO Box 250
PO Box 250

City Cape May Point State NJ Zip Code 08212

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 ▼
455.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228583

Amount of Each Receipt this Period
25.00

C. Ms. Valerie Chang
Full Name (Last, First, Middle Initial)

Mailing Address 7025 Lantern Rd

City Indianapolis State IN Zip Code 46256

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228584

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00

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 259 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Valerie Chang		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241930
Mailing Address 7025 Lantern Rd		Amount of Each Receipt this Period 10.00
City Indianapolis	State IN	Zip Code 46256
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Alexander M. Chanler		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239749
Mailing Address 40 Gray Rd		Amount of Each Receipt this Period 30.00
City Andover	State MA	Zip Code 01810
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 ▼ 410.00	

Full Name (Last, First, Middle Initial) C. Ms. Sylvia Chaplain		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2014 Transaction ID : 4235527
Mailing Address 3201 Great Meadow Rd		Amount of Each Receipt this Period 15.00
City Dedham	State MA	Zip Code 02026
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 260 OF 2648
	<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)
EMILY's List

A. Ms. Ardis Chapman
Full Name (Last, First, Middle Initial)
Mailing Address 2323 Kirkland Village Circle

City Bethlehem	State PA	Zip Code 18017
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4231664

Amount of Each Receipt this Period
10.00

B. Ms. Ardis Chapman
Full Name (Last, First, Middle Initial)
Mailing Address 2323 Kirkland Village Circle

City Bethlehem	State PA	Zip Code 18017
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2014

Transaction ID : 4235963

Amount of Each Receipt this Period
10.00

C. Ms. Violet Chappelow
Full Name (Last, First, Middle Initial)
Mailing Address 103 19th St

City Del Mar	State CA	Zip Code 92014
-----------------	-------------	-------------------

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

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

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
12	/	19	/	2014

Transaction ID : 4238462

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 262 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Barbara Jane Charnak
 Full Name (Last, First, Middle Initial)
 Mailing Address 6338 Riverton Avenue
 City North Hollywood State CA Zip Code 91606
 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 ▼ 562.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4238000
 Amount of Each Receipt this Period
 25.00

B. Ms. Ellen Chase
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 Prentice Hill Rd
 City Alstead State NH Zip Code 03602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lotus Development Corp. Occupation Graphic Designer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231566
 Amount of Each Receipt this Period
 20.00

C. Ms. Aimee Lee Cheek
 Full Name (Last, First, Middle Initial)
 Mailing Address 6209 Estelle St
 City San Diego State CA Zip Code 92115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236815
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 263 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Aimee Lee Cheek
 Full Name (Last, First, Middle Initial)
 Mailing Address 6209 Estelle St
 City San Diego State CA Zip Code 92115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236816
 Amount of Each Receipt this Period
 15.00

B. Ms. Aimee Lee Cheek
 Full Name (Last, First, Middle Initial)
 Mailing Address 6209 Estelle St
 City San Diego State CA Zip Code 92115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241077
 Amount of Each Receipt this Period
 15.00

C. Myrel S. Chernick
 Full Name (Last, First, Middle Initial)
 Mailing Address Seven Mercer Street # 4B
 City New York State NY Zip Code 10013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Artist
 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
 12 / 08 / 2014
Transaction ID : 4233323
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00
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 264 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathleen Cherry		Date of Receipt
Mailing Address 1112 Chalet Dr. E.		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4228586
Mobile	AL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="15.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="391.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Kathleen Cherry		Date of Receipt
Mailing Address 1112 Chalet Dr. E.		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4229760
Mobile	AL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="15.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="391.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Kathleen Cherry		Date of Receipt
Mailing Address 1112 Chalet Dr. E.		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4240684
Mobile	AL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="15.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="391.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 265 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Kathleen Cherry

Mailing Address 1112 Chalet Dr. E.

City	State	Zip Code
Mobile	AL	36608

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

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
391.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241694

Amount of Each Receipt this Period

15.00

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

Mailing Address 3309 NE Trilein Dr

City	State	Zip Code
Ankeny	IA	50021

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

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2014

Transaction ID : 4235874

Amount of Each Receipt this Period

15.00

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

Mailing Address 972 W 4th Ave

City	State	Zip Code
Eugene	OR	97402

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

Name of Employer	Occupation
University Of Oregon	Graduate Student

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
12	/	20	/	2014

Transaction ID : 4239275

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 266 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Nancy Chidester
 Full Name (Last, First, Middle Initial)
 Mailing Address 5053 S Apache Ave.
 City Sierra Vista State AZ Zip Code 85650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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
 12 / 01 / 2014
Transaction ID : 4230337
 Amount of Each Receipt this Period
 100.00

B. Ms. Jean Childers
 Full Name (Last, First, Middle Initial)
 Mailing Address 1905 Pine Run Dr.
 City Chesterfield State MO Zip Code 63017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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
 12 / 29 / 2014
Transaction ID : 4242537
 Amount of Each Receipt this Period
 100.00

C. Mr. John Ted Childs , Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1000
 City South Salem State NY Zip Code 10590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Ted Chilos LLC Consultant
 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
 12 / 02 / 2014
Transaction ID : 4230961
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
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 267 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jodell Chiles
 Full Name (Last, First, Middle Initial)
 Mailing Address 1895 Alpine #2b
 City Boulder State CO Zip Code 80304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Adams Tweekve Five Star School Dist. Occupation Educator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4238463
 Amount of Each Receipt this Period
25.00

B. Randy Ching
 Full Name (Last, First, Middle Initial)
 Mailing Address 1560 Kanunu St, #818
 City Honolulu State HI Zip Code 96814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1260.00**

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231941
 Amount of Each Receipt this Period
100.00

C. Julia Chinn
 Full Name (Last, First, Middle Initial)
 Mailing Address 1024 Essex Ct.
 City Lebanon State IN Zip Code 46052
 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 **600.00**

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4233038
 Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....	325.00
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 268 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Harry Chipman
 Full Name (Last, First, Middle Initial)
 Mailing Address 823 Spring Valley Dr.
 City Fredericksburg State VA Zip Code 22405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243196
 Amount of Each Receipt this Period
 300.00

B. Eric Christenson
 Full Name (Last, First, Middle Initial)
 Mailing Address 514 East New Jersey Ave. Apt. 5116
 City Southern Pines State NC Zip Code 28387
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239132
 Amount of Each Receipt this Period
 50.00

C. Aurora Christophers
 Full Name (Last, First, Middle Initial)
 Mailing Address 28519 Mountain Meadow Rd 28519 Mountain Meadow Rd
 City Escondido State CA Zip Code 92026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Architect
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229616
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 269 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Aurora Christophers		Date of Receipt
Mailing Address 28519 Mountain Meadow Rd 28519 Mountain Meadow Rd		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Escondido	State CA	Zip Code 92026
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer None	Occupation Architect	Transaction ID : 4241215
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	
		Amount of Each Receipt this Period <input type="text" value="50.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Patricia Christy		Date of Receipt
Mailing Address 152 McGivern Way		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City Santa Cruz	State CA	Zip Code 95060
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer Requested	Occupation Requested	Transaction ID : 4230340
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	
		Amount of Each Receipt this Period <input type="text" value="40.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Patricia Christy		Date of Receipt
Mailing Address 152 McGivern Way		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City Santa Cruz	State CA	Zip Code 95060
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer Requested	Occupation Requested	Transaction ID : 4232268
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	
		Amount of Each Receipt this Period <input type="text" value="50.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 270 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Rosamond L. Chviek
 Full Name (Last, First, Middle Initial)
 Mailing Address 177 Black Hill Road
 City Plainfield State CT Zip Code 06374
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239753
 Amount of Each Receipt this Period
 25.00

B. Kathleen Ciabattoni
 Full Name (Last, First, Middle Initial)
 Mailing Address 117 Vasquez Ave
 City San Francisco State CA Zip Code 94127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227692
 Amount of Each Receipt this Period
 150.00

C. Ms. Marlene H. Cianci
 Full Name (Last, First, Middle Initial)
 Mailing Address 1704 Glenkarney Place
 City Silver Spring State MD Zip Code 20902
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232851
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00
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 271 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elaine Ciccone		Date of Receipt
Mailing Address 247 Lincoln Road		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Brooklyn	NY	11225
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4232777
Name of Employer	Occupation	Amount of Each Receipt this Period
Nycdoe	Counselor	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Elaine C. Cinelli		Date of Receipt
Mailing Address 1500 Worcestor Rd Apt 525		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Framingham	MA	01702
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4234827
Name of Employer	Occupation	Amount of Each Receipt this Period
The Health Foundation Of Central Ma	Vp Programs	<input type="text" value="75.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Dianne C. Cinnamon		Date of Receipt
Mailing Address 9517 Veirs Drive		<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
Rockville	MD	20850
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4238201
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="450.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="110.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 272 OF 2648
	<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)
EMILY's List

A. Dr. Dorothy Kyte Cinquemani
Full Name (Last, First, Middle Initial)

Mailing Address 400 Lake Ave NE, 404w
S210

City Largo State GA Zip Code 33771

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
795.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : 4229747

Amount of Each Receipt this Period
10.00

B. Dr. Dorothy Kyte Cinquemani
Full Name (Last, First, Middle Initial)

Mailing Address 400 Lake Ave NE, 404w
S210

City Largo State GA Zip Code 33771

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
795.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014

Transaction ID : 4240584

Amount of Each Receipt this Period
10.00

C. Dr. Dorothy Kyte Cinquemani
Full Name (Last, First, Middle Initial)

Mailing Address 400 Lake Ave NE, 404w
S210

City Largo State GA Zip Code 33771

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
795.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : 4229761

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 35.00

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 273 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Dorothy Kyte Cinquemani		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240685
Mailing Address 400 Lake Ave NE, 404w S210		Amount of Each Receipt this Period 15.00
City Largo	State GA	Zip Code 33771
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 795.00	

Full Name (Last, First, Middle Initial) B. Dr. Dorothy Kyte Cinquemani		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228592
Mailing Address 400 Lake Ave NE, 404w S210		Amount of Each Receipt this Period 25.00
City Largo	State GA	Zip Code 33771
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 795.00	

Full Name (Last, First, Middle Initial) C. Dr. Dorothy Kyte Cinquemani		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241418
Mailing Address 400 Lake Ave NE, 404w S210		Amount of Each Receipt this Period 25.00
City Largo	State GA	Zip Code 33771
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 795.00	

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 274 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mrs. Clara K. Claeys

Mailing Address 6418 Spyglass Lane

City Bradenton State FL Zip Code 34202

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236503

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. Ms. Catherine Claman

Mailing Address 1 Penn Plaza

City New York State NY Zip Code 10119

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

Name of Employer Self Occupation Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
760.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228593

Amount of Each Receipt this Period
 60.00

Full Name (Last, First, Middle Initial)
c. Ms. Catherine Claman

Mailing Address 1 Penn Plaza

City New York State NY Zip Code 10119

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

Name of Employer Self Occupation Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
760.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241935

Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 275 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Susan Clancy
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 584
 City State Zip Code
 Sewickley PA 15143
 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 ▼
 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230343
 Amount of Each Receipt this Period
 50.00

B. Mrs. Mary J. Clapper
 Full Name (Last, First, Middle Initial)
 Mailing Address 136 Hacienda Carmel
 City State Zip Code
 Carmel CA 93923
 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 ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237328
 Amount of Each Receipt this Period
 35.00

C. Dr. Eve V. Clark
 Full Name (Last, First, Middle Initial)
 Mailing Address 936 Wing Pl.
 City State Zip Code
 Stanford CA 94305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Astanford University Professor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227646
 Amount of Each Receipt this Period
 1800.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1885.00
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 276 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Sarah B. Clark
Full Name (Last, First, Middle Initial)
Mailing Address 10420 Inwood Ave.
City Silver Spring State MD Zip Code 20902
FEC ID number of contributing federal political committee. **C**
Name of Employer Friedlander Misler Occupation Legal Assistant
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
12 / 23 / 2014
Transaction ID : 4240356
Amount of Each Receipt this Period
75.00

B. Mr. Peter B. & Jean Clark
Full Name (Last, First, Middle Initial)
Mailing Address 13217 E 8th Ave.
City Spokane Valley State WA Zip Code 99216
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 ▼ 225.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4227437
Amount of Each Receipt this Period
25.00

C. Ms. Janet H. Clark
Full Name (Last, First, Middle Initial)
Mailing Address 167 Rolling Meadows
City Ridgeland State MS Zip Code 39157
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 ▼ 230.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2014
Transaction ID : 4231821
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 277 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Mary Lou Clark

Mailing Address 896 Livingston St.

City State Zip Code
Brighton MI 48116

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
388.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236450

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Mrs. Patricia M. Clark

Mailing Address 5245 Broadway St.

City State Zip Code
Indianapolis IN 46220

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233037

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
C. Mrs. Elizabeth Clark

Mailing Address 2929 Macomb St. NW

City State Zip Code
Washington DC 20008

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

Name of Employer Occupation
None Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
503.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238465

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 335.00

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 278 OF 2648
	<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)
EMILY's List

A. Mrs. Jane M. Clark
Full Name (Last, First, Middle Initial)
Mailing Address 1 Cliff Court Ext.
City Southern Pines State NC Zip Code 28387
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation HOUSEWIFE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt
12 / 09 / 2014
Transaction ID : 4233847
Amount of Each Receipt this Period
150.00

B. Victoria Clarke
Full Name (Last, First, Middle Initial)
Mailing Address 9304 Leafy Glade Road
City Plano State TX Zip Code 75024
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Advertising
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233703
Amount of Each Receipt this Period
25.00

C. Ms. Carole L. Clarke
Full Name (Last, First, Middle Initial)
Mailing Address 304 Junipero Plaza
City Santa Barbara State CA Zip Code 93105
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation None
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 210.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238466
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
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 279 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jean I. Clarke
 Full Name (Last, First, Middle Initial)
 Mailing Address 16535 Birch Briar Trl
 City State Zip Code
 Minneapolis MN 55447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Author
 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
 12 / 01 / 2014
Transaction ID : 4230345
 Amount of Each Receipt this Period
 100.00

B. Ms. Martha L. Clatterbaugh
 Full Name (Last, First, Middle Initial)
 Mailing Address 23832 45th Ave. SE
 City State Zip Code
 Bothell WA 98021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242721
 Amount of Each Receipt this Period
 200.00

C. Mr. Walter Clay
 Full Name (Last, First, Middle Initial)
 Mailing Address 203 High Street
 City State Zip Code
 Newburyport MA 01950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232160
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	335.00
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 280 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Rebecca Cleary
 Full Name (Last, First, Middle Initial)
 Mailing Address 4691 Saratoga Road
 City Langley State WA Zip Code 98260
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236583
 Amount of Each Receipt this Period
 100.00

B. Ms. Cheree Cleghorn
 Full Name (Last, First, Middle Initial)
 Mailing Address 3419 Lowell St NW
 City Washington State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238468
 Amount of Each Receipt this Period
 35.00

c. Ms. Cheree Cleghorn
 Full Name (Last, First, Middle Initial)
 Mailing Address 3419 Lowell St NW
 City Washington State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4242982
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
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 281 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Timothy Close
Full Name (Last, First, Middle Initial)
Mailing Address 1114 Grandview Ave.
City Columbus State OH Zip Code 43212
FEC ID number of contributing federal political committee. **C**
Name of Employer City Of Columbus/Retired Occupation Firefighter/Paramedic
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **255.00**

Date of Receipt **11 / 25 / 2014**
Transaction ID : 4227359
Amount of Each Receipt this Period **15.00**

B. Eleanor Close
Full Name (Last, First, Middle Initial)
Mailing Address 114 Kathryn Cove
City San Marcos State TX Zip Code 78666
FEC ID number of contributing federal political committee. **C**
Name of Employer Texas State University Occupation Faculty
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **210.00**

Date of Receipt **11 / 28 / 2014**
Transaction ID : 4228598
Amount of Each Receipt this Period **10.00**

C. Eleanor Close
Full Name (Last, First, Middle Initial)
Mailing Address 114 Kathryn Cove
City San Marcos State TX Zip Code 78666
FEC ID number of contributing federal political committee. **C**
Name of Employer Texas State University Occupation Faculty
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **210.00**

Date of Receipt **12 / 28 / 2014**
Transaction ID : 4241937
Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **35.00**
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 282 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Eleanor Close		Date of Receipt M M / D D / Y Y Y Y Y 11 / 27 / 2014 Transaction ID : 4228332
Mailing Address 114 Kathryn Cove		Amount of Each Receipt this Period 15.00
City San Marcos	State TX	Zip Code 78666
FEC ID number of contributing federal political committee. C	Name of Employer Texas State University	Occupation Faculty
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Eleanor Close		Date of Receipt M M / D D / Y Y Y Y Y 12 / 27 / 2014 Transaction ID : 4240967
Mailing Address 114 Kathryn Cove		Amount of Each Receipt this Period 15.00
City San Marcos	State TX	Zip Code 78666
FEC ID number of contributing federal political committee. C	Name of Employer Texas State University	Occupation Faculty
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Peter Clothier		Date of Receipt M M / D D / Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232671
Mailing Address 1727 Deloz Avenue		Amount of Each Receipt this Period 25.00
City Los Angeles	State CA	Zip Code 90027
FEC ID number of contributing federal political committee. C	Name of Employer Self	Occupation Writer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 283 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Penelope D Clute
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Cumberland Ave
 City State Zip Code
 Plattsburgh NY 12901
 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 ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237111
 Amount of Each Receipt this Period
 30.00

B. Ms. Penelope D Clute
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Cumberland Ave
 City State Zip Code
 Plattsburgh NY 12901
 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 ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2014
Transaction ID : 4239342
 Amount of Each Receipt this Period
 30.00

C. Ms. Penelope D Clute
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Cumberland Ave
 City State Zip Code
 Plattsburgh NY 12901
 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 ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4244754
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 284 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Deborah J. Coady
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Groton Street
 City Forest Hills State NY Zip Code 11375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Md
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4236043
 Amount of Each Receipt this Period
 50.00

B. Ms. Susan F. Coberly
 Full Name (Last, First, Middle Initial)
 Mailing Address 2658 E. Alluvial Ave., Apt. 114
 City Fresno State CA Zip Code 93720
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4242717
 Amount of Each Receipt this Period
 200.00

C. Ms. Mary Ann Cochran
 Full Name (Last, First, Middle Initial)
 Mailing Address 2006 Back Bay Court
 Nassau Bay
 City Houston State TX Zip Code 77058
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234593
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 285 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Stephanie Cochran		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228599
Mailing Address PO Box 107		Amount of Each Receipt this Period 5.00
City Gardiner	State MT	Zip Code 59030
FEC ID number of contributing federal political committee. C	Name of Employer Nps	Occupation Maint. Worker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

Full Name (Last, First, Middle Initial) B. Stephanie Cochran		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2014 Transaction ID : 4235917
Mailing Address PO Box 107		Amount of Each Receipt this Period 5.00
City Gardiner	State MT	Zip Code 59030
FEC ID number of contributing federal political committee. C	Name of Employer Nps	Occupation Maint. Worker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

Full Name (Last, First, Middle Initial) C. Stephanie Cochran		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237041
Mailing Address PO Box 107		Amount of Each Receipt this Period 5.00
City Gardiner	State MT	Zip Code 59030
FEC ID number of contributing federal political committee. C	Name of Employer Nps	Occupation Maint. Worker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

SUBTOTAL of Receipts This Page (optional).....▶	15.00
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 286 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Stephanie Cochran			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2014 Transaction ID : 4239280
Mailing Address PO Box 107			Amount of Each Receipt this Period 5.00
City Gardiner	State MT	Zip Code 59030	
FEC ID number of contributing federal political committee. C			
Name of Employer Nps	Occupation Maint. Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00		

Full Name (Last, First, Middle Initial) B. Stephanie Cochran			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241938
Mailing Address PO Box 107			Amount of Each Receipt this Period 5.00
City Gardiner	State MT	Zip Code 59030	
FEC ID number of contributing federal political committee. C			
Name of Employer Nps	Occupation Maint. Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00		

Full Name (Last, First, Middle Initial) C. Stephanie Cochran			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232608
Mailing Address PO Box 107			Amount of Each Receipt this Period 15.00
City Gardiner	State MT	Zip Code 59030	
FEC ID number of contributing federal political committee. C			
Name of Employer Nps	Occupation Maint. Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00		

SUBTOTAL of Receipts This Page (optional).....▶	25.00
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 287 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Connie Codding		Date of Receipt
Mailing Address PO Box 3550		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City State Zip Code Rohnert Park CA 94927		Transaction ID : 4232384
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 Codding Investments	Occupation Exec Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. Edward Coe		Date of Receipt
Mailing Address 206 Heather Ln		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City State Zip Code Columbia MO 65203		Transaction ID : 4230006
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
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 ▼ <input type="text" value="1060.00"/>	

Full Name (Last, First, Middle Initial) C. Mr. Edward Coe		Date of Receipt
Mailing Address 206 Heather Ln		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Columbia MO 65203		Transaction ID : 4240630
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
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 ▼ <input type="text" value="1060.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="270.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 288 OF 2648
	<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)
EMILY's List

A. Mr. Edward Coe
Full Name (Last, First, Middle Initial)

Mailing Address 206 Heather Ln

City Columbia State MO Zip Code 65203

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 ▼ 1060.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228600

Amount of Each Receipt this Period
 40.00

B. Mr. Edward Coe
Full Name (Last, First, Middle Initial)

Mailing Address 206 Heather Ln

City Columbia State MO Zip Code 65203

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 ▼ 1060.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241696

Amount of Each Receipt this Period
 40.00

C. Mr. Edward Coe
Full Name (Last, First, Middle Initial)

Mailing Address 206 Heather Ln

City Columbia State MO Zip Code 65203

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 ▼ 1060.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234630

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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 289 OF 2648
	<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)
EMILY's List

A. Mr. Jerolyn A. Coen
Full Name (Last, First, Middle Initial)

Mailing Address 468 Gehrke Rd

City Port Angeles State WA Zip Code 98362

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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232807

Amount of Each Receipt this Period
 200.00

B. Ms. Lizabeth A. Cohen
Full Name (Last, First, Middle Initial)

Mailing Address 76 Brattle

City Cambridge State MA Zip Code 02138

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

Name of Employer Harvard University Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4242657

Amount of Each Receipt this Period
 200.00

c. Natalie Cohen
Full Name (Last, First, Middle Initial)

Mailing Address 1725 Homet Road

City Pasadena State CA Zip Code 91106

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239756

Amount of Each Receipt this Period
 70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00

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 290 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sheila Cohen		Date of Receipt
Mailing Address 209 Groton Avenue		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cortland	NY	13045
FEC ID number of contributing federal political committee.		Transaction ID : 4236773
FEC ID number: <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="35.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="635.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Sheila Cohen		Date of Receipt
Mailing Address 1621 Mission Hills Rd Apt 402		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
Northbrook	IL	60062
FEC ID number of contributing federal political committee.		Transaction ID : 4233240
FEC ID number: <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. David Cohen		Date of Receipt
Mailing Address 1002 N. Cleveland Street		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Arlington	VA	22201
FEC ID number of contributing federal political committee.		Transaction ID : 4234667
FEC ID number: <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="410.00"/>
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 291 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ruth L. Cohen		Date of Receipt
Mailing Address 28 W. 3rd St., Apt. 1312		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City State Zip Code South Orange NJ 07079		Transaction ID : 4242750
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="75.00"/>
Name of Employer Self	Occupation Marriage And Family Therapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="263.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Joan Lebold Lebold Cohen		Date of Receipt
Mailing Address 1095 Park Ave		<input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City State Zip Code New York NY 10128		Transaction ID : 4229489
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="15.00"/>
Name of Employer Self Employed	Occupation Photographer/Art Historian	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1710.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Joan Lebold Lebold Cohen		Date of Receipt
Mailing Address 1095 Park Ave		<input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City State Zip Code New York NY 10128		Transaction ID : 4229488
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer Self Employed	Occupation Photographer/Art Historian	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1710.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 292 OF 2648
	<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)
EMILY's List

A. Ms. Joan Lebold Lebold Cohen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1095 Park Ave
 City New York State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Photographer/Art Historian
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1710.00**

Date of Receipt **12 / 28 / 2014**
Transaction ID : 4241626
 Amount of Each Receipt this Period **50.00**

B. Ms. Patricia Cohen
 Full Name (Last, First, Middle Initial)
 Mailing Address 6164 Stow Canyon Road
 City Goleta State CA Zip Code 93117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UCSB Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **230.00**

Date of Receipt **12 / 05 / 2014**
Transaction ID : 4232680
 Amount of Each Receipt this Period **15.00**

C. Cynthia Cohen
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 Cape May Lane
 City East Amherst State NY Zip Code 14051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University At Buffalo Occupation Graduate Student
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **12 / 13 / 2014**
Transaction ID : 4236238
 Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional).....	90.00
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 293 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mrs. Sandra G. Cohen

Mailing Address 10 River Ter.

City Tarrytown State NY Zip Code 10591

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **238.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014

Transaction ID : 4230349

Amount of Each Receipt this Period
113.00

Full Name (Last, First, Middle Initial)
B. Ms. Syma C. Cohn

Mailing Address 4848 Russell Avenue S.

City Minneapolis State MN Zip Code 55410

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

Name of Employer Self Occupation Requested

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
11 / 28 / 2014

Transaction ID : 4228602

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
c. Ms. Syma C. Cohn

Mailing Address 4848 Russell Avenue S.

City Minneapolis State MN Zip Code 55410

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

Name of Employer Self Occupation Requested

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
12 / 28 / 2014

Transaction ID : 4241939

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	163.00
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 294 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Hera Cohn-Haft		Date of Receipt
Mailing Address 22 Beverly Rd		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City State Zip Code West Hartford CT 06119		Transaction ID : 4229770
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="200.00"/>
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="245.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Hera Cohn-Haft		Date of Receipt
Mailing Address 22 Beverly Rd		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City State Zip Code West Hartford CT 06119		Transaction ID : 4239757
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="200.00"/>
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="245.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Dee K. Coil		Date of Receipt
Mailing Address 3168 Cafeto Drive		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City State Zip Code Walnut Creek CA 94598		Transaction ID : 4231717
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1700.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
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: (check only one)	PAGE 295 OF 2648
	<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)
EMILY's List

A. Mrs. Melinda L. Coker
Full Name (Last, First, Middle Initial)
Mailing Address 4411 Cascades Shoreline Dr.
City Tyler State TX Zip Code 75709
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 **305.00**

Date of Receipt **12 / 14 / 2014**
Transaction ID : 4235529
Amount of Each Receipt this Period **15.00**

B. Mrs. Melinda L. Coker
Full Name (Last, First, Middle Initial)
Mailing Address 4411 Cascades Shoreline Dr.
City Tyler State TX Zip Code 75709
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 **305.00**

Date of Receipt **12 / 18 / 2014**
Transaction ID : 4237984
Amount of Each Receipt this Period **20.00**

C. Ms. Heather L Colburn
Full Name (Last, First, Middle Initial)
Mailing Address 1324 Spaight St
City Madison State WI Zip Code 53703
FEC ID number of contributing federal political committee. **C**
Name of Employer Colburn Consulting Occupation Political Consultant
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1200.00**

Date of Receipt **11 / 25 / 2014**
Transaction ID : 4230181
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **135.00**
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 296 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Heather L Colburn		Date of Receipt
Mailing Address 1324 Spaight St		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Madison	WI	53703
FEC ID number of contributing federal political committee.		Transaction ID : 4240847
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
Colburn Consulting	Political Consultant	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1200.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ariel Colburn		Date of Receipt
Mailing Address 3614 Westbrook Ave		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Nashville	TN	37205
FEC ID number of contributing federal political committee.		Transaction ID : 4228603
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="205.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ariel Colburn		Date of Receipt
Mailing Address 3614 Westbrook Ave		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Nashville	TN	37205
FEC ID number of contributing federal political committee.		Transaction ID : 4241421
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="205.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="120.00"/>
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 297 OF 2648
	(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)
EMILY's List

A. Ariel Colburn
Full Name (Last, First, Middle Initial)
Mailing Address 3614 Westbrook Ave
City Nashville State TN Zip Code 37205
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt
11 / 28 / 2014
Transaction ID : 4228604
Amount of Each Receipt this Period
15.00

B. Ariel Colburn
Full Name (Last, First, Middle Initial)
Mailing Address 3614 Westbrook Ave
City Nashville State TN Zip Code 37205
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4241422
Amount of Each Receipt this Period
15.00

c. Ms. Jane Colby
Full Name (Last, First, Middle Initial)
Mailing Address 102 Acorns Way
City Brunswick State ME Zip Code 04011
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 635.00

Date of Receipt
12 / 12 / 2014
Transaction ID : 4235274
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 298 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cammie Cole		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233390
Mailing Address 243 Riverdale Dr.		Amount of Each Receipt this Period 25.00
City Macon	State GA	Zip Code 31204
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 350.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Cammie Cole		Date of Receipt 12 / 14 / 2014 Transaction ID : 4235443
Mailing Address 243 Riverdale Dr.		Amount of Each Receipt this Period 25.00
City Macon	State GA	Zip Code 31204
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 350.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Wallace A. Cole		Date of Receipt 12 / 27 / 2014 Transaction ID : 4241041
Mailing Address PO Box 67		Amount of Each Receipt this Period 1000.00
City Denali National Park	State AK	Zip Code 99755
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 1000.00	
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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: (check only one)	PAGE 299 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Patricia Cole-Kitze		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238470
Mailing Address 1094 hess dr		Amount of Each Receipt this Period 50.00
City Avondale Estates	State GA	Zip Code 30002
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Ms. Sara Coleman		Date of Receipt M M / D D / Y Y Y Y 12 / 08 / 2014 Transaction ID : 4232962
Mailing Address 309 Andrews Park Blvd		Amount of Each Receipt this Period 40.00
City Erie	State PA	Zip Code 16511
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 ▼ 425.00	

Full Name (Last, First, Middle Initial) C. Ms. Joyce Coleman		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236690
Mailing Address English Dept., Ou		Amount of Each Receipt this Period 20.00
City Norman	State OK	Zip Code 73069
FEC ID number of contributing federal political committee. C		
Name of Employer Univ. Of Oklahoma	Occupation College Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 300 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Alma M. Coles
 Full Name (Last, First, Middle Initial)
 Mailing Address 4178 Combe Wy
 City San Diego State CA Zip Code 92122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 30 / 2014
Transaction ID : 4243019
 Amount of Each Receipt this Period
 50.00

B. Norma Colin
 Full Name (Last, First, Middle Initial)
 Mailing Address 10975 Highland Cir.
 City Boca Raton State FL Zip Code 33428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227854
 Amount of Each Receipt this Period
 15.00

C. Richard Collier
 Full Name (Last, First, Middle Initial)
 Mailing Address 814 Cragmont Avenue
 City Berkeley State CA Zip Code 94708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cooper, White & Cooper, Llp Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243489
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.00
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 301 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Richard Collier		Date of Receipt M M / D D / Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227573
Mailing Address 814 Cragmont Avenue		Amount of Each Receipt this Period 250.00
City Berkeley	State CA	Zip Code 94708
FEC ID number of contributing federal political committee. C		
Name of Employer Cooper, White & Cooper, Llp	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) B. Mrs. Elizabeth Colwell		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2014 Transaction ID : 4244784
Mailing Address 28 Creekside Way		Amount of Each Receipt this Period 15.00
City Asheville	State NC	Zip Code 28804
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Marilyn Commeau		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228611
Mailing Address 28005 Ridgebluff Ct		Amount of Each Receipt this Period 20.00
City Rancho Palos Verdes	State CA	Zip Code 90275
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 ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 302 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Marilyn Commeau
Full Name (Last, First, Middle Initial)

Mailing Address 28005 Ridgebluff Ct

City Rancho Palos Verdes State CA Zip Code 90275

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 ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241945

Amount of Each Receipt this Period
 200.00

B. Ms. Audrey M. Conant
Full Name (Last, First, Middle Initial)

Mailing Address 778 Hillside Ter Apt L

City Ripon State WI Zip Code 54971

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 ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230354

Amount of Each Receipt this Period
 100.00

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

Mailing Address 224 Conewango Ave

City Warren State PA Zip Code 16365

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

Name of Employer Na Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235530

Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	320.00
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 303 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lois Conaway		Date of Receipt
Mailing Address 224 Conewango Ave		M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014
City	State	Zip Code
Warren	PA	16365
FEC ID number of contributing federal political committee. C		Transaction ID : 4237813
Name of Employer Na		Amount of Each Receipt this Period
Occupation Homemaker		200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		1100.00

Full Name (Last, First, Middle Initial) B. Ms. Lee G. Cone		Date of Receipt
Mailing Address 1090 Kupulau Drive		M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014
City	State	Zip Code
Kihei	HI	96753
FEC ID number of contributing federal political committee. C		Transaction ID : 4239758
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		785.00

Full Name (Last, First, Middle Initial) C. Ms. Barbara A. Cone		Date of Receipt
Mailing Address 24 Bellis Circle		M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014
City	State	Zip Code
Cambridge	MA	02140
FEC ID number of contributing federal political committee. C		Transaction ID : 4231626
Name of Employer Self		Amount of Each Receipt this Period
Occupation Visual Artist		25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		375.00

SUBTOTAL of Receipts This Page (optional).....▶	275.00
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 304 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cynthia L Conger		Date of Receipt 12 / 23 / 2014 Transaction ID : 4239760
Mailing Address 2300 Andover Ct. #560		Amount of Each Receipt this Period 25.00
City Little Rock	State AR	Zip Code 72227
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Conger Wealth Management	Occupation Wealth Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Barbara G. Conley		Date of Receipt 12 / 13 / 2014 Transaction ID : 4236105
Mailing Address 7600 W Military Drive #160		Amount of Each Receipt this Period 25.00
City San Antonio	State TX	Zip Code 78227
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Dr. Gordon Connally		Date of Receipt 12 / 05 / 2014 Transaction ID : 4232903
Mailing Address 12 University Ave		Amount of Each Receipt this Period 30.00
City Buffalo	State NY	Zip Code 14214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 305 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Rena Wheeler Connell
 Full Name (Last, First, Middle Initial)
 Mailing Address 15422 228th St SE
 City Snohomish State WA Zip Code 98296
 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 ▼
 475.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231697
 Amount of Each Receipt this Period
 10.00

B. Ms. Rena Wheeler Connell
 Full Name (Last, First, Middle Initial)
 Mailing Address 15422 228th St SE
 City Snohomish State WA Zip Code 98296
 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 ▼
 475.00

Date of Receipt
 12 / 10 / 2014
Transaction ID : 4234449
 Amount of Each Receipt this Period
 10.00

C. Ms. Rena Wheeler Connell
 Full Name (Last, First, Middle Initial)
 Mailing Address 15422 228th St SE
 City Snohomish State WA Zip Code 98296
 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 ▼
 475.00

Date of Receipt
 12 / 17 / 2014
Transaction ID : 4237735
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 306 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Arthur Connelly
 Full Name (Last, First, Middle Initial)
 Mailing Address 11410 Blackburn St
 City Livonia State MI Zip Code 48150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.20

Date of Receipt
 12 / 05 / 2014
Transaction ID : 4232390
 Amount of Each Receipt this Period
 12.12

B. Ms. Cindy Connelly Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1039 Cresthaven Drive
 City Silver Spring State MD Zip Code 20903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Library Of Congress Occupation Research Scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 12 / 28 / 2014
Transaction ID : 4241949
 Amount of Each Receipt this Period
 35.00

C. Ms. Leslie Conner-Maiyo
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 673
 City Salmon State ID Zip Code 83467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236827
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	82.12
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 307 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Leslie Conner-Maiyo
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 673
 City Salmon State ID Zip Code 83467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 29 / 2014
Transaction ID : 4242857
 Amount of Each Receipt this Period
 15.00

B. Ms. Leslie Conner-Maiyo
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 673
 City Salmon State ID Zip Code 83467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 15 / 2014
Transaction ID : 4236826
 Amount of Each Receipt this Period
 35.00

C. Mark Connolly
 Full Name (Last, First, Middle Initial)
 Mailing Address 1721 Lasalle Ave.
 City Norfolk State VA Zip Code 23509
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4243056
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 308 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cynthia D. Conrad , M.D.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014
Mailing Address 9 Wingate Road		Transaction ID : 4243290
City Guilford	State CT	Zip Code 06437
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Ms. Shelley R. Conrath		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2014
Mailing Address 5283 Marion Johnson Rd		Transaction ID : 4243020
City Athens	State OH	Zip Code 45701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Susan Contratto		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014
Mailing Address 305 Wilton Street		Transaction ID : 4234247
City Ann Arbor	State MI	Zip Code 48103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
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 ▼ 320.00	

SUBTOTAL of Receipts This Page (optional).....▶	280.00
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 309 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. David Coogan		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238474
Mailing Address 2599 Dolly Bay Dr		Amount of Each Receipt this Period 100.00
City Palm Harbor	State FL	Zip Code 34684
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Healthcare	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Suzanne Cook		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228617
Mailing Address 7223 Prestwick Lane		Amount of Each Receipt this Period 50.00
City Portage	State MI	Zip Code 49024
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Ms. Suzanne Cook		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241423
Mailing Address 7223 Prestwick Lane		Amount of Each Receipt this Period 50.00
City Portage	State MI	Zip Code 49024
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 310 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Heidi Cook		Date of Receipt
Mailing Address 14204 SE 51 Street		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City Bellevue	State WA	Zip Code 98006
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4235506
Name of Employer None	Occupation None	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
	<input type="text" value="2625.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Heidi Cook		Date of Receipt
Mailing Address 14204 SE 51 Street		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Bellevue	State WA	Zip Code 98006
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4243004
Name of Employer None	Occupation None	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="75.00"/>
	<input type="text" value="2625.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth J. Cook		Date of Receipt
Mailing Address PO Box 72511		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City Fairbanks	State AK	Zip Code 99707
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4232818
Name of Employer REQUESTED	Occupation REQUESTED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="25.00"/>
	<input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 311 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Carol Coonrod
 Full Name (Last, First, Middle Initial)
 Mailing Address 1621 T Street, NW
 City Washington State DC Zip Code 20009
 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 ▼ 610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236240
 Amount of Each Receipt this Period
 20.00

B. Phillip R. Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 5758 Kingsbury
 City Dearborn Heights State MI Zip Code 48127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238475
 Amount of Each Receipt this Period
 50.00

C. Mrs. Connie L. Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 38617 N 25 Ln
 City Phoenix State AZ Zip Code 85086
 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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231691
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 312 OF 2648
	<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)
EMILY's List

A. Ms. Cynthia Cooper
Full Name (Last, First, Middle Initial)
Mailing Address 9 Marigold Place

City Durham	State NC	Zip Code 27705
----------------	-------------	-------------------

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 ▼ **315.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228618

Amount of Each Receipt this Period

30.00

B. Ms. Cynthia Cooper
Full Name (Last, First, Middle Initial)
Mailing Address 9 Marigold Place

City Durham	State NC	Zip Code 27705
----------------	-------------	-------------------

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 ▼ **315.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241951

Amount of Each Receipt this Period

30.00

C. Ms. Daphne J. Cooper
Full Name (Last, First, Middle Initial)
Mailing Address 2210 Birchwood Dr.

City Rockford	State IL	Zip Code 61107
------------------	-------------	-------------------

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 ▼ **465.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	17	/	2014

Transaction ID : 4237539

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 313 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Daphne J. Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 2210 Birchwood Dr.
 City Rockford State IL Zip Code 61107
 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 ▼ 465.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230358
 Amount of Each Receipt this Period
 40.00

B. Ms. Patricia Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 2185 Jasmine Dr.
 City Lexington State KY Zip Code 40504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Kentucky Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234219
 Amount of Each Receipt this Period
 20.00

C. Ms. Harriet R. Copel
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Monett Place
 City Greenlawn State NY Zip Code 11740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer School District Occupation Educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234486
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 314 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marion L. Copenhaver		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014
Mailing Address 80 Lyme Rd., Apt. 19		Transaction ID : 4244850
City Hanover	State NH	Zip Code 03755
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Ms. Patricia Coppejans		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2014
Mailing Address 5013 Douglas Ln.		Transaction ID : 4242713
City Santa Barbara	State CA	Zip Code 93111
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Helen Corbell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014
Mailing Address 413 Mount Joy Dr		Transaction ID : 4226695
City New Braunfels	State TX	Zip Code 78130
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
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 ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional).....▶	1170.00
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 315 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Robert Corbin
 Full Name (Last, First, Middle Initial)
 Mailing Address 2025 Lemon Tree Ln
 City Ponca City State OK Zip Code 74604
 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 ▼ 600.00

Date of Receipt
 12 / 01 / 2014
Transaction ID : 4230360
 Amount of Each Receipt this Period
 200.00

B. Richard Corliss
 Full Name (Last, First, Middle Initial)
 Mailing Address 1216 Riverside Dr Se
 City Saint Cloud State MN Zip Code 56304
 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 ▼ 285.00

Date of Receipt
 12 / 17 / 2014
Transaction ID : 4237664
 Amount of Each Receipt this Period
 10.00

C. Evan Corns
 Full Name (Last, First, Middle Initial)
 Mailing Address 3681 Greenwood Drive
 City Pepper Pike State OH Zip Code 44124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 12 / 10 / 2014
Transaction ID : 4234450
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	310.00
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 316 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marilyn J. Coronado			Date of Receipt
Mailing Address 1426 Toyon Drive			<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4239764
Concord	CA	94520	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
Spectrum Center Schools	Special Education Administration		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Nancy Cosgriff			Date of Receipt
Mailing Address 2115 Jackson Cir.			<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4239584
Marine On Saint Croix	MN	55047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer	Occupation		
Norwest	Management Consult.		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="375.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Joan Costello			Date of Receipt
Mailing Address 5627 Olinda Rd.			<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4232944
El Sobrante	CA	94803	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer	Occupation		
None	None		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1190.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
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 317 OF 2648
	(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)
EMILY's List

A. Ms. Joan Costello
Full Name (Last, First, Middle Initial)
Mailing Address 5627 Olinda Rd.
City El Sobrante State CA Zip Code 94803
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 ▼
1190.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014
Transaction ID : 4236846
Amount of Each Receipt this Period
100.00

B. Ms. Cathleen A. Costello
Full Name (Last, First, Middle Initial)
Mailing Address 1308 Forest Glen Dr. So.
City Winnetka State IL Zip Code 60093
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-Employed Consultant
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1875.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4230178
Amount of Each Receipt this Period
100.00

C. Ms. Cathleen A. Costello
Full Name (Last, First, Middle Initial)
Mailing Address 1308 Forest Glen Dr. So.
City Winnetka State IL Zip Code 60093
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-Employed Consultant
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1875.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240846
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....	300.00
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 318 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Cathleen A. Costello
 Full Name (Last, First, Middle Initial)
 Mailing Address 1308 Forest Glen Dr. So.
 City Winnetka State IL Zip Code 60093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1875.00**

Date of Receipt **12 / 15 / 2014**
Transaction ID : 4236579
 Amount of Each Receipt this Period **425.00**

B. Ms. Doris B. Coster
 Full Name (Last, First, Middle Initial)
 Mailing Address 123 River Road
 City East Haddam State CT Zip Code 06423
 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 **360.00**

Date of Receipt **12 / 20 / 2014**
Transaction ID : 4239117
 Amount of Each Receipt this Period **30.00**

C. Ms. Bonnie Cotton
 Full Name (Last, First, Middle Initial)
 Mailing Address 929 Hall Terrace
 929 Hall Terrace
 City Glasgow State MT Zip Code 59230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Agriculture
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **480.00**

Date of Receipt **11 / 28 / 2014**
Transaction ID : 4228623
 Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional).....	475.00
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 319 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Bonnie Cotton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236052
Mailing Address 929 Hall Terrace 929 Hall Terrace		Amount of Each Receipt this Period 20.00
City Glasgow	State MT	Zip Code 59230
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Agriculture	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) B. Ms. Bonnie Cotton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241210
Mailing Address 929 Hall Terrace 929 Hall Terrace		Amount of Each Receipt this Period 20.00
City Glasgow	State MT	Zip Code 59230
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Agriculture	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) C. Paul Cotton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243190
Mailing Address 186 S Willard St		Amount of Each Receipt this Period 35.00
City Burlington	State VT	Zip Code 05401
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 320 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Catherine M. Coult

Mailing Address 4300 W River Pkwy., Apt. 602

City State Zip Code
Minneapolis MN 55406

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239110

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. James R. Coulter

Mailing Address 318 Tiger Valley Road

City State Zip Code
Washington VA 22747

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236730

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Ms. Elizabeth A. Courtenay

Mailing Address 1800 6TH Street

City State Zip Code
Manhattan Beach CA 90266

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

Name of Employer Occupation
CA APPELLATE PROJECT Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239147

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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 321 OF 2648
	<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)
EMILY's List

A. Ms. Ann C. Courter
Full Name (Last, First, Middle Initial)
Mailing Address 322 Linden Avenue
City Oak Park State IL Zip Code 60302
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation consultant
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233094
Amount of Each Receipt this Period
150.00

B. Anne Courtright
Full Name (Last, First, Middle Initial)
Mailing Address 2109 7th Ave
City Pueblo State CO Zip Code 81003
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 **338.00**

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233531
Amount of Each Receipt this Period
12.00

C. Anne Courtright
Full Name (Last, First, Middle Initial)
Mailing Address 2109 7th Ave
City Pueblo State CO Zip Code 81003
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 **338.00**

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234075
Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional)..... **174.00**
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 322 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. John A. Covey

Mailing Address 14340 Yukon Ave.

City State Zip Code
Hawthorne CA 90250

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

Name of Employer Occupation
Torrance Unified School District Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
323.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230361

Amount of Each Receipt this Period
88.00

Full Name (Last, First, Middle Initial)
B. Ms. Carolyn Covington

Mailing Address 3350 N Clark-Wolverine Road

City State Zip Code
Palmer AK 99645

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239766

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
C. Ms. Diana Cowan

Mailing Address Poboc 1762

City State Zip Code
Port Townsend WA 98368

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228361

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 88.00

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 323 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Diana Cowan		Date of Receipt
Mailing Address Poboc 1762		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Port Townsend	WA	98368
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="290.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Joann Cowan		Date of Receipt
Mailing Address 153 N. 200 E.		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Vernal	UT	84078
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Requested	Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Karen Cox		Date of Receipt
Mailing Address 15214 Manzanita Diggins Dr.		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Nevada City	CA	95959
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="895.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="35.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="155.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 324 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Fred Cox		Date of Receipt M M / D D / Y Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236174
Mailing Address 802 E Mountain View Ave Apt 156		Amount of Each Receipt this Period 300.00
City Ellensburg	State WA	Zip Code 98926
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Mickey Cox		Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236726
Mailing Address 1316 West Xyler		Amount of Each Receipt this Period 50.00
City Tulsa	State OK	Zip Code 74127
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	

Full Name (Last, First, Middle Initial) C. Merita Cox		Date of Receipt M M / D D / Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230160
Mailing Address 1800 Old Meadow Rd #1020		Amount of Each Receipt this Period 35.00
City McLean	State VA	Zip Code 22102
FEC ID number of contributing federal political committee. C		
Name of Employer Tdp,Llc	Occupation Meeting Planner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00	

SUBTOTAL of Receipts This Page (optional).....▶	385.00
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 325 OF 2648
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Merita Cox

Mailing Address 1800 Old Meadow Rd #1020

City McLean State VA Zip Code 22102

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

Name of Employer Tdp,Llc Occupation Meeting Planner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **485.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4239768

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
B. Ms. Cathy Cox

Mailing Address P.O. Box 409

City Young Harris State GA Zip Code 30582

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

Name of Employer Young Harris College Occupation College 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
 12 / 11 / 2014

Transaction ID : 4234732

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
c. Mr. Phillip J. Crabill

Mailing Address 902 W Eldorado Parkway, Apt 19101

City Little Elm State TX Zip Code 75068

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **377.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : 4238480

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	245.00
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 326 OF 2648
	<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)
EMILY's List

A. Charlene Craig
Full Name (Last, First, Middle Initial)
Mailing Address 25 Fox Ln Unit 8

City Olivebridge	State NY	Zip Code 12461
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231694

Amount of Each Receipt this Period
250.00

B. Ms. Rosemary Craig
Full Name (Last, First, Middle Initial)
Mailing Address 4767 Brixston Drive

City Hilliard	State OH	Zip Code 43026
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 ▼ 350.00	

Date of Receipt
11 / 25 / 2014
Transaction ID : 4230138

Amount of Each Receipt this Period
30.00

C. Ms. Rosemary Craig
Full Name (Last, First, Middle Initial)
Mailing Address 4767 Brixston Drive

City Hilliard	State OH	Zip Code 43026
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 ▼ 350.00	

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239769

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 327 OF 2648
	(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)
EMILY's List

A. Ms. Nancy Craig
Full Name (Last, First, Middle Initial)
Mailing Address 413 Bonnie Ln
City Lansdale State PA Zip Code 19446
FEC ID number of contributing federal political committee. **C**
Name of Employer North Penn School District Occupation Teacher
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **400.00**

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236454
Amount of Each Receipt this Period
100.00

B. Ms. Frances Craig
Full Name (Last, First, Middle Initial)
Mailing Address 19857 Bethpage Ct
City Ashburn State VA Zip Code 20147
FEC ID number of contributing federal political committee. **C**
Name of Employer Unanet Occupation Software Executive
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **2200.00**

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230973
Amount of Each Receipt this Period
1200.00

C. Kathi Cramer
Full Name (Last, First, Middle Initial)
Mailing Address 163 S. Roslyn Street
City Denver State CO Zip Code 80230
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 **235.00**

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238481
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... **1350.00**
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 328 OF 2648
	<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)
EMILY's List

A. Ms. Marilyn Cranney
Full Name (Last, First, Middle Initial)
Mailing Address 1830 East 23rd Street
City Brooklyn State NY Zip Code 11229
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 26 / 2014
Transaction ID : 4227862
Amount of Each Receipt this Period 50.00

B. Dr. Anna L. Crawford
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 2533
City Blue Ridge State GA Zip Code 30513
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 11 / 26 / 2014
Transaction ID : 4227863
Amount of Each Receipt this Period 100.00

C. Dr. Anna L. Crawford
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 2533
City Blue Ridge State GA Zip Code 30513
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 12 / 26 / 2014
Transaction ID : 4240849
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 329 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Patricia Crawford
 Full Name (Last, First, Middle Initial)
 Mailing Address 2251 Ridgemoor Ct
 City State Zip Code
 Burton MI 48509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238482
 Amount of Each Receipt this Period
 15.00

B. Ms. Ann Craxton
 Full Name (Last, First, Middle Initial)
 Mailing Address 317 Mountain Road
 City State Zip Code
 Dalton NH 03598
 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 ▼
 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239770
 Amount of Each Receipt this Period
 100.00

C. Richard Crebs
 Full Name (Last, First, Middle Initial)
 Mailing Address 402 Harwood Rd
 City State Zip Code
 Baltimore MD 21228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 685.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239771
 Amount of Each Receipt this Period
 5.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 330 OF 2648
	<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)
EMILY's List

A. Ms. Carole H Crew
Full Name (Last, First, Middle Initial)
Mailing Address 13404 Meridian Ave N
City Seattle State WA Zip Code 98133
FEC ID number of contributing federal political committee. **C**
Name of Employer Compass Health Occupation Family Therapist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **360.00**

Date of Receipt **12 / 10 / 2014**
Transaction ID : 4234443
Amount of Each Receipt this Period **30.00**

B. Mr. David Crimmins
Full Name (Last, First, Middle Initial)
Mailing Address 252 5th Street
City Jersey City State NJ Zip Code 07302
FEC ID number of contributing federal political committee. **C**
Name of Employer Beth Israel Me. Ctr. Occupation RN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **445.00**

Date of Receipt **12 / 11 / 2014**
Transaction ID : 4235149
Amount of Each Receipt this Period **15.00**

C. Mr. David Crimmins
Full Name (Last, First, Middle Initial)
Mailing Address 252 5th Street
City Jersey City State NJ Zip Code 07302
FEC ID number of contributing federal political committee. **C**
Name of Employer Beth Israel Me. Ctr. Occupation RN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **445.00**

Date of Receipt **11 / 28 / 2014**
Transaction ID : 4228632
Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **65.00**
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 331 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. David Crimmins		Date of Receipt 12 / 28 / 2014 Transaction ID : 4241962
Mailing Address 252 5th Street		Amount of Each Receipt this Period 20.00
City Jersey City	State NJ	Zip Code 07302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 445.00
Name of Employer Beth Israel Me. Ctr.	Occupation RN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 445.00	

Full Name (Last, First, Middle Initial) B. Mr. Donald Crippen		Date of Receipt 12 / 01 / 2014 Transaction ID : 4230363
Mailing Address 844 W Cliff Dr Apt 305		Amount of Each Receipt this Period 50.00
City Spokane	State WA	Zip Code 99204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 733.00
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 ▼ 733.00	

Full Name (Last, First, Middle Initial) C. Ms. Sidney W. Croff		Date of Receipt 12 / 19 / 2014 Transaction ID : 4238483
Mailing Address 31 Davis Brook Drive		Amount of Each Receipt this Period 1000.00
City Natick	State MA	Zip Code 01760
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	1070.00
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 332 OF 2648
	<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)
EMILY's List

A. Ms. Patricia Crone
Full Name (Last, First, Middle Initial)
Mailing Address 16995 Del Monte Avenue Apt. 128

City Morgan Hill	State CA	Zip Code 95037
---------------------	-------------	-------------------

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

Name of Employer Oakwood School	Occupation Educator
------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2014

Transaction ID : 4233663

Amount of Each Receipt this Period
20.00

B. Catherine Croner
Full Name (Last, First, Middle Initial)
Mailing Address 220 East 73 St

City New York	State NY	Zip Code 10021
------------------	-------------	-------------------

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

Name of Employer Cowtan & Tout	Occupation Textile Designer
-----------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2014

Transaction ID : 4235898

Amount of Each Receipt this Period
20.00

C. Ms. Elizabeth J. Cronin
Full Name (Last, First, Middle Initial)
Mailing Address 1224 Bay Ave

City Bay Head	State NJ	Zip Code 08742
------------------	-------------	-------------------

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

Name of Employer Ocean County Library	Occupation Reference Librarian
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4239774

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 333 OF 2648
	<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)
EMILY's List

A. Richard Crooker
Full Name (Last, First, Middle Initial)
Mailing Address 7928 Woodsbluff Run

City Fogelsville	State PA	Zip Code 18051
---------------------	-------------	-------------------

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 ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228636

Amount of Each Receipt this Period
5.00

B. Richard Crooker
Full Name (Last, First, Middle Initial)
Mailing Address 7928 Woodsbluff Run

City Fogelsville	State PA	Zip Code 18051
---------------------	-------------	-------------------

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 ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241699

Amount of Each Receipt this Period
5.00

C. Richard Crooker
Full Name (Last, First, Middle Initial)
Mailing Address 7928 Woodsbluff Run

City Fogelsville	State PA	Zip Code 18051
---------------------	-------------	-------------------

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 ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238484

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	20.00
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 334 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Afton E. Crooks		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014
Mailing Address 6232 Manoa St		Transaction ID : 4236381
City Oakland	State CA	Zip Code 94618
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
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 ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Madeline Crosby		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014
Mailing Address 17 Ridge Rd, Apt 3		Transaction ID : 4233338
City Lincoln	State MA	Zip Code 01773
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Harvard University	Occupation Database Biocurator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

Full Name (Last, First, Middle Initial) C. Ms. Joanne Crosby		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 1277 Silverado St		Transaction ID : 4228637
City La Jolla	State CA	Zip Code 92037
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

SUBTOTAL of Receipts This Page (optional).....▶	1055.00
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 335 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joanne Crosby		Date of Receipt
Mailing Address 1277 Silverado St		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
La Jolla	CA	92037
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4234250
Name of Employer	Occupation	Amount of Each Receipt this Period
Requested	Requested	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="265.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Joanne Crosby		Date of Receipt
Mailing Address 1277 Silverado St		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
La Jolla	CA	92037
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4241964
Name of Employer	Occupation	Amount of Each Receipt this Period
Requested	Requested	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="265.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Nancy R. Crow		Date of Receipt
Mailing Address 1031 Marion St.		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Denver	CO	80218
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4238485
Name of Employer	Occupation	Amount of Each Receipt this Period
Pendleton, Wilson, Hennessey & Crow, P	Lawyer	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="475.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="130.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 336 OF 2648 (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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy H Crowell			Date of Receipt M M / D D / Y Y Y Y 12 / 29 / 2014 Transaction ID : 4242835		
Mailing Address 2822 Broadway			Amount of Each Receipt this Period 100.00		
City Kalamazoo	State MI	Zip Code 49008			
FEC ID number of contributing federal political committee. C					
Name of Employer None		Occupation None			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 355.16			

Full Name (Last, First, Middle Initial) B. Ms. Lynne Crowell			Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236676		
Mailing Address 5920 Horsemans Canyon Drive, Apart			Amount of Each Receipt this Period 15.00		
City Walnut Creek	State CA	Zip Code 94595			
FEC ID number of contributing federal political committee. C					
Name of Employer None		Occupation None			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2350.00			

Full Name (Last, First, Middle Initial) C. Ms. Lynne Crowell			Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228638		
Mailing Address 5920 Horsemans Canyon Drive, Apart			Amount of Each Receipt this Period 50.00		
City Walnut Creek	State CA	Zip Code 94595			
FEC ID number of contributing federal political committee. C					
Name of Employer None		Occupation None			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2350.00			

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 337 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Lynne Crowell
 Full Name (Last, First, Middle Initial)
 Mailing Address 5920 Horsemans Canyon Drive, Apart
 City State Zip Code
 Walnut Creek CA 94595
 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 ▼
 2350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241425
 Amount of Each Receipt this Period
 50.00

B. Ms. Areta Crowell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2934 N Beachwood Drive
 City State Zip Code
 Los Angeles CA 90068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228640
 Amount of Each Receipt this Period
 100.00

C. Ms. Areta Crowell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2934 N Beachwood Drive
 City State Zip Code
 Los Angeles CA 90068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241966
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 338 OF 2648
	<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)
EMILY's List

A. Karolynn K. Crowell
Full Name (Last, First, Middle Initial)

Mailing Address 21906 Dumetz Rd

City Woodland Hills State CA Zip Code 91364

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
 / /

11 / 28 / 2014

Transaction ID : 4228641

Amount of Each Receipt this Period
 10.00

B. Karolynn K. Crowell
Full Name (Last, First, Middle Initial)

Mailing Address 21906 Dumetz Rd

City Woodland Hills State CA Zip Code 91364

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
 / /

12 / 20 / 2014

Transaction ID : 4239076

Amount of Each Receipt this Period
 10.00

C. Karolynn K. Crowell
Full Name (Last, First, Middle Initial)

Mailing Address 21906 Dumetz Rd

City Woodland Hills State CA Zip Code 91364

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
 / /

12 / 28 / 2014

Transaction ID : 4241967

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **30.00**

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 339 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Luanne/Larry Croy		Date of Receipt
Mailing Address 30110 Morningside Dr		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
Perrysburg	OH	43551
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Larmar Foods, Inc	Business Owner	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="350.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Allison M. Crump		Date of Receipt
Mailing Address 9 Kinnaird St #1		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cambridge	MA	02139
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Tdc	Consultant	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) C. Ana Cruz		Date of Receipt
Mailing Address 6802 Rivershore Drive		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Tampa	FL	33604
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Requested	Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1200.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 340 OF 2648
	<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)
EMILY's List

A. Ana Cruz
Full Name (Last, First, Middle Initial)
Mailing Address 6802 Rivershore Drive
City Tampa State FL Zip Code 33604
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240848
Amount of Each Receipt this Period
100.00

B. Zachary Cruze
Full Name (Last, First, Middle Initial)
Mailing Address 3100 Scarborough Lane West
City Colleyville State TX Zip Code 76034
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt
12 / 17 / 2014
Transaction ID : 4237699
Amount of Each Receipt this Period
10.00

c. Ms. Paula Cullenberg
Full Name (Last, First, Middle Initial)
Mailing Address 6743 E 140th Ave
City Anchorage State AK Zip Code 99516
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
12 / 29 / 2014
Transaction ID : 4242656
Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶ 260.00
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 341 OF 2648
	<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)
EMILY's List

A. Ms. Mary J Culnan
Full Name (Last, First, Middle Initial)
Mailing Address 3711 39th St NW
City Washington State DC Zip Code 20016
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014
Transaction ID : 4244947
Amount of Each Receipt this Period
100.00

B. Harriet Culver
Full Name (Last, First, Middle Initial)
Mailing Address 135 W 120 St Fl 3
City New York State NY Zip Code 10027
FEC ID number of contributing federal political committee. **C**
Name of Employer Culver Pictures Inc Occupation small business owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2014
Transaction ID : 4236242
Amount of Each Receipt this Period
25.00

C. Ms. Anne Cunningham
Full Name (Last, First, Middle Initial)
Mailing Address 810 Louise Dr
City Sunnyvale State CA Zip Code 94087
FEC ID number of contributing federal political committee. **C**
Name of Employer Aspen Healthcare Occupation Physical Therapist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 730.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228642
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 342 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anne Cunningham	Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4231622
Mailing Address 810 Louise Dr	Amount of Each Receipt this Period 15.00
City Sunnyvale State CA Zip Code 94087	
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 730.00
Name of Employer Aspen Healthcare Occupation Physical Therapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ms. Anne Cunningham	Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2014 Transaction ID : 4239086
Mailing Address 810 Louise Dr	Amount of Each Receipt this Period 15.00
City Sunnyvale State CA Zip Code 94087	
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 730.00
Name of Employer Aspen Healthcare Occupation Physical Therapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ms. Anne Cunningham	Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241627
Mailing Address 810 Louise Dr	Amount of Each Receipt this Period 15.00
City Sunnyvale State CA Zip Code 94087	
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 730.00
Name of Employer Aspen Healthcare Occupation Physical Therapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Receipts This Page (optional)..... ▶	45.00
TOTAL This Period (last page this line number only)..... ▶	15.00

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

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

FOR LINE NUMBER: PAGE 343 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Carrie Cunningham
 Full Name (Last, First, Middle Initial)
 Mailing Address 8091 stallion way
 City sacramento State CA Zip Code 95830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Hms Vp
 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
 12 / 14 / 2014
Transaction ID : 4235444
 Amount of Each Receipt this Period
 25.00

B. Ms. Marilyn Cunningham
 Full Name (Last, First, Middle Initial)
 Mailing Address 1451 Skillman Avenue #E
 City St. Paul State MN Zip Code 55109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Minnesota Nurse Assoc. Nurse
 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
 12 / 01 / 2014
Transaction ID : 4230365
 Amount of Each Receipt this Period
 100.00

C. Thomas Cunningham
 Full Name (Last, First, Middle Initial)
 Mailing Address 44125 Cottisford St
 City Northville State MI Zip Code 48167
 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 ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232579
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 344 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Cynthia Cunningham		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014
Mailing Address 5907 SW Yamhill St.		Transaction ID : 4235879
City Portland	State OR	Zip Code 97221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
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 ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Ms. Barbara Currie		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014
Mailing Address 4800 Fillmore Avenue Apt. 544		Transaction ID : 4236243
City Alexandria	State VA	Zip Code 22311
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
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 ▼ 1430.00	

Full Name (Last, First, Middle Initial) C. Anne Curry		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2014
Mailing Address 4404 Briar Creek		Transaction ID : 4230976
City Dallas	State TX	Zip Code 75214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
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	

SUBTOTAL of Receipts This Page (optional).....▶	310.00
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 345 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Arthur Curtis		Date of Receipt
Mailing Address P.O Box 160		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bailey	CO	80421
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4231618
Name of Employer	Occupation	Amount of Each Receipt this Period
Geo-Link, Inc.	Geologist	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Suzanne G. Cusick		Date of Receipt
Mailing Address 171 Young Road		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Augusta	ME	04330
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4235121
Name of Employer	Occupation	Amount of Each Receipt this Period
New York University	Professor	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="230.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Brenda R. Cutter		Date of Receipt
Mailing Address 2336 McComas Rd		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
White Hall	MD	21161
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4234439
Name of Employer	Occupation	Amount of Each Receipt this Period
Self	Touch Healing Therapist	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="95.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 346 OF 2648
	<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)
EMILY's List

A. Velma Cyr
 Full Name (Last, First, Middle Initial)
 Mailing Address 13949 Dominica Dr.
 City Seminole State FL Zip Code 33776
 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 ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228645
 Amount of Each Receipt this Period
 27.00

B. Velma Cyr
 Full Name (Last, First, Middle Initial)
 Mailing Address 13949 Dominica Dr.
 City Seminole State FL Zip Code 33776
 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 ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243555
 Amount of Each Receipt this Period
 27.00

C. Ms. Amy K. Dacey
 Full Name (Last, First, Middle Initial)
 Mailing Address 3271-C Sutton Place NW
 City Washington State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dnc Occupation Ceo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1413.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234870
 Amount of Each Receipt this Period
 83.00

SUBTOTAL of Receipts This Page (optional).....▶	137.00
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 347 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Diane Dagan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1080 Homestead Ave.
 City Walnut Creek State CA Zip Code 94598
 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 ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233065
 Amount of Each Receipt this Period
 200.00

B. Ms. Marian B. Dailey
 Full Name (Last, First, Middle Initial)
 Mailing Address 5372 Punta Alta Unit 3h
 City Laguna Woods State CA Zip Code 92637
 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 ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231501
 Amount of Each Receipt this Period
 200.00

C. Mrs. Ellen L. Dale
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 Gardiner Ct.
 City Orinda State CA Zip Code 94563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2014
Transaction ID : 4238106
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1400.00
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 348 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Beverly A. Dale		Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236754
Mailing Address 1111 West 12th Street, #115		Amount of Each Receipt this Period 15.00
City Austin State TX Zip Code 78703	FEC ID number of contributing federal political committee. C	
Name of Employer None Occupation None	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3015.00

Full Name (Last, First, Middle Initial) B. Dr. Beverly A. Dale		Date of Receipt M M / D D / Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4234846
Mailing Address 1111 West 12th Street, #115		Amount of Each Receipt this Period 1500.00
City Austin State TX Zip Code 78703	FEC ID number of contributing federal political committee. C	
Name of Employer None Occupation None	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3015.00

Full Name (Last, First, Middle Initial) C. Mrs. Jo Anna Dale		Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237389
Mailing Address 1315 W. Johns Blvd.		Amount of Each Receipt this Period 50.00
City Raymore State MO Zip Code 64083	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 ▼ 350.00

SUBTOTAL of Receipts This Page (optional).....▶	1565.00
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 349 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Joanne Hahn Dale

Mailing Address 12117 Fiori Lane

City State Zip Code
Sebastopol CA 95472

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

Name of Employer Occupation
Self Investment Property

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 23 / 2014
Transaction ID : 4239776

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Mary Ann Daly

Mailing Address 919 W. Carmen

City State Zip Code
Chicago IL 60640

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

Name of Employer Occupation
Self Psychotherapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228649

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Mary Ann Daly

Mailing Address 919 W. Carmen

City State Zip Code
Chicago IL 60640

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

Name of Employer Occupation
Self Psychotherapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241970

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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 350 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Daly-Baniak		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2014 Transaction ID : 4229487
Mailing Address 1327 Ridgeway Ave		Amount of Each Receipt this Period 50.00
City Munster	State IN	Zip Code 46321
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation None		Aggregate Year-to-Date ▼ 350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Donna D'Amico		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234455
Mailing Address 835 Pequot Trail		Amount of Each Receipt this Period 5.00
City Stonington	State CT	Zip Code 06378
FEC ID number of contributing federal political committee. C	Name of Employer Electric Boat	
Occupation Technical Aide Specialest		Aggregate Year-to-Date ▼ 595.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Donna D'Amico		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4234921
Mailing Address 835 Pequot Trail		Amount of Each Receipt this Period 5.00
City Stonington	State CT	Zip Code 06378
FEC ID number of contributing federal political committee. C	Name of Employer Electric Boat	
Occupation Technical Aide Specialest		Aggregate Year-to-Date ▼ 595.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 351 OF 2648
	<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)
EMILY's List

A. Donna D'Amico
Full Name (Last, First, Middle Initial)

Mailing Address 835 Pequot Trail

City Stonington State CT Zip Code 06378

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

Name of Employer Electric Boat Occupation Technical Aide Specialest

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **595.00**

Date of Receipt **12 / 15 / 2014**

Transaction ID : 4236609

Amount of Each Receipt this Period **5.00**

B. Donna D'Amico
Full Name (Last, First, Middle Initial)

Mailing Address 835 Pequot Trail

City Stonington State CT Zip Code 06378

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

Name of Employer Electric Boat Occupation Technical Aide Specialest

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **595.00**

Date of Receipt **11 / 28 / 2014**

Transaction ID : 4228650

Amount of Each Receipt this Period **10.00**

C. Donna D'Amico
Full Name (Last, First, Middle Initial)

Mailing Address 835 Pequot Trail

City Stonington State CT Zip Code 06378

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

Name of Employer Electric Boat Occupation Technical Aide Specialest

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **595.00**

Date of Receipt **12 / 15 / 2014**

Transaction ID : 4236650

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **25.00**

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 352 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Donna D'Amico			Date of Receipt
Mailing Address 835 Pequot Trail			<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4241971
Stonington	CT	06378	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
Electric Boat	Technical Aide Specialest		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="595.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Donna D'Amico			Date of Receipt
Mailing Address 835 Pequot Trail			<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4233645
Stonington	CT	06378	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="15.00"/>
Name of Employer	Occupation		
Electric Boat	Technical Aide Specialest		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="595.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Susan M. Damplo			Date of Receipt
Mailing Address 110 W. 3rd St., Apt. 1401			<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4227386
New York	NY	10012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="1200.00"/>
Name of Employer	Occupation		
Self	Attorney		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1200.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1225.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 353 OF 2648
	<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)
EMILY's List

A. David Daniel
Full Name (Last, First, Middle Initial)

Mailing Address 209 Eastside Rd

City Burns State TN Zip Code 37029

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 ▼ **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : 4229812

Amount of Each Receipt this Period
25.00

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

Mailing Address 209 Eastside Rd

City Burns State TN Zip Code 37029

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 ▼ **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014

Transaction ID : 4240766

Amount of Each Receipt this Period
25.00

C. Mr. David R. Daniel
Full Name (Last, First, Middle Initial)

Mailing Address 24210 Postal Ave #E

City Moreno Valley State CA Zip Code 92553

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

Name of Employer Statewide Property Services, Inc Occupation Realtor

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 / 30 / 2014

Transaction ID : 4229614

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **85.00**

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 354 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. David R. Daniel
 Full Name (Last, First, Middle Initial)
 Mailing Address 24210 Postal Ave #E
 City Moreno Valley State CA Zip Code 92553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Statewide Property Services, Inc Occupation Realtor
 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
 12 / 26 / 2014
Transaction ID : 4240811
 Amount of Each Receipt this Period
 35.00

B. Dr. Robert E. Daniell , Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 Sandy Ridge Road
 City Stoughton State MA Zip Code 02072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234581
 Amount of Each Receipt this Period
 10.00

C. Dr. Robert E. Daniell , Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 Sandy Ridge Road
 City Stoughton State MA Zip Code 02072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237234
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 355 OF 2648
	<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)
EMILY's List

A. Mr. Troy E. Daniels
Full Name (Last, First, Middle Initial)

Mailing Address 17 Alcott St

City Allston State MA Zip Code 02134

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

Name of Employer Bae Systems, Inc. Occupation Programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014

Transaction ID : 4227867

Amount of Each Receipt this Period
25.00

B. Mr. Troy E. Daniels
Full Name (Last, First, Middle Initial)

Mailing Address 17 Alcott St

City Allston State MA Zip Code 02134

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

Name of Employer Bae Systems, Inc. Occupation Programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014

Transaction ID : 4240761

Amount of Each Receipt this Period
25.00

C. Ms. Ruth R. Daniels
Full Name (Last, First, Middle Initial)

Mailing Address 28404 Emerald Drive

City Gold Beach State OR Zip Code 97444

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 ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : 4235091

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **100.00**

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 356 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Lynn Dantzker
 Full Name (Last, First, Middle Initial)
 Mailing Address 7859 La Quinta Ct.
 City Pleasanton State CA Zip Code 94588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Management Partners Occupation Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **575.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4232936
 Amount of Each Receipt this Period
200.00

B. John Michael Darcey
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Bentwood Rd
 City West Hartford State CT Zip Code 06107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **372.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237626
 Amount of Each Receipt this Period
14.00

C. Lynn Dash
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 Jumping Brook Rd
 City Lincroft State NJ Zip Code 07738
 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 **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4242768
 Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....	314.00
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 357 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Debra Dassow

Mailing Address N73 W5341 Georgetown drive

City Cedarburg State WI Zip Code 53012

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 ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235940

Amount of Each Receipt this Period
100.00

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

Mailing Address 3230 Polaris Avenue #23

City Las Vegas State NV Zip Code 89102

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

Name of Employer Occupation
Dog Diggin Designs Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236877

Amount of Each Receipt this Period
100.00

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

Mailing Address 3230 Polaris Avenue #23

City Las Vegas State NV Zip Code 89102

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

Name of Employer Occupation
Dog Diggin Designs Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236878

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00

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 358 OF 2648
	<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	

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Maura Dausey		Date of Receipt
Mailing Address PO Box 1844		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code East Hampton NY 11937		Transaction ID : 4228654
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
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 ▼ <input type="text" value="2600.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Maura Dausey		Date of Receipt
Mailing Address PO Box 1844		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City State Zip Code East Hampton NY 11937		Transaction ID : 4233720
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
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 ▼ <input type="text" value="2600.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Maura Dausey		Date of Receipt
Mailing Address PO Box 1844		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code East Hampton NY 11937		Transaction ID : 4241974
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
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 ▼ <input type="text" value="2600.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 359 OF 2648
	<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)
EMILY's List

A. Ms. Katy A. Davenport
Full Name (Last, First, Middle Initial)
Mailing Address 23452 Highway 31

City Metaline Falls	State WA	Zip Code 99153
------------------------	-------------	-------------------

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

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

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
12	/	01	/	2014

Transaction ID : 4230374

Amount of Each Receipt this Period
300.00

B. Karen Davenport
Full Name (Last, First, Middle Initial)
Mailing Address 3638 John Carrol Drive

City Decatur	State GA	Zip Code 30034
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	06	/	2014

Transaction ID : 4232504

Amount of Each Receipt this Period
20.00

C. Mr. Mrs. Gary and Denise David
Full Name (Last, First, Middle Initial)
Mailing Address 9477 Poole St.

City La Jolla	State CA	Zip Code 92037
------------------	-------------	-------------------

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 ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2014

Transaction ID : 4232383

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....▶	520.00
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 360 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Marna S. Davidson
 Full Name (Last, First, Middle Initial)
 Mailing Address 12093 Aprilia Dr
 City Boynton Beach State FL Zip Code 33437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4230980
 Amount of Each Receipt this Period
 36.00

B. Mrs. Tatiana Davidson
 Full Name (Last, First, Middle Initial)
 Mailing Address 303 Lake Avenue West
 City Kirkland State WA Zip Code 98033
 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 ▼ 543.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228656
 Amount of Each Receipt this Period
 25.00

C. Mrs. Tatiana Davidson
 Full Name (Last, First, Middle Initial)
 Mailing Address 303 Lake Avenue West
 City Kirkland State WA Zip Code 98033
 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 ▼ 543.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241975
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 86.00
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 361 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. David Davies
 Full Name (Last, First, Middle Initial)
 Mailing Address 31263 Lake RD
 City Bay Village State OH Zip Code 44140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233084
 Amount of Each Receipt this Period
 200.00

B. Christine Starr Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 851 Moraine Dr
 City Lincoln State NE Zip Code 68510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Doane College Occupation Adjunct Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240879
 Amount of Each Receipt this Period
 35.00

C. Rian Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 1222 Dewey Ave.
 City Evanston State IL Zip Code 60202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Evanston Skokie District 65 Occupation Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228657
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	245.00
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 362 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Rian Davis		Date of Receipt 12 / 28 / 2014 Transaction ID : 4241815
Mailing Address 1222 Dewey Ave.		Amount of Each Receipt this Period 10.00
City Evanston	State IL	Zip Code 60202
FEC ID number of contributing federal political committee. C	Name of Employer Evanston Skokie District 65	Occupation Teacher
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.16	

Full Name (Last, First, Middle Initial) B. Mrs. Jeanne G. Davis		Date of Receipt 12 / 03 / 2014 Transaction ID : 4231714
Mailing Address 1812 NW 6th Ave		Amount of Each Receipt this Period 125.00
City Gainesville	State FL	Zip Code 32603
FEC ID number of contributing federal political committee. C	Name of Employer None	Occupation None
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Sally L. Davis		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233398
Mailing Address 308 E Republican St Apt 903		Amount of Each Receipt this Period 25.00
City Seattle	State WA	Zip Code 98102
FEC ID number of contributing federal political committee. C	Name of Employer None	Occupation None
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	160.00
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 363 OF 2648
	(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)
EMILY's List

A. Ms. J. Louise Davis
Full Name (Last, First, Middle Initial)
Mailing Address 2171 Haviland Drive

City Grants Pass	State OR	Zip Code 97527
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
620.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4229756

Amount of Each Receipt this Period

40.00	10.00
-------	-------

B. Ms. J. Louise Davis
Full Name (Last, First, Middle Initial)
Mailing Address 2171 Haviland Drive

City Grants Pass	State OR	Zip Code 97527
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
620.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240593

Amount of Each Receipt this Period

40.00	10.00
-------	-------

C. Ms. Doralene Davis
Full Name (Last, First, Middle Initial)
Mailing Address 1680 Beaver Hollow Road

City Norristown	State PA	Zip Code 19403
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228659

Amount of Each Receipt this Period

40.00	20.00
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SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 364 OF 2648
	<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)
EMILY's List

A. Ms. Doralene Davis
Full Name (Last, First, Middle Initial)
Mailing Address 1680 Beaver Hollow Road
City Norristown State PA Zip Code 19403
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1120.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4241976
Amount of Each Receipt this Period
20.00

B. Ms. Doralene Davis
Full Name (Last, First, Middle Initial)
Mailing Address 1680 Beaver Hollow Road
City Norristown State PA Zip Code 19403
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1120.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230378
Amount of Each Receipt this Period
100.00

C. Ms. Ellen B. Davis
Full Name (Last, First, Middle Initial)
Mailing Address 2818 N. 46th Ave., K387
City Hollywood State FL Zip Code 33021
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 ▼ 217.00

Date of Receipt
11 / 28 / 2014
Transaction ID : 4228660
Amount of Each Receipt this Period
11.00

SUBTOTAL of Receipts This Page (optional).....▶ 131.00
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 365 OF 2648
	<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)
EMILY's List

A. Ms. Ellen B. Davis
Full Name (Last, First, Middle Initial)
Mailing Address 2818 N. 46th Ave., K387

City Hollywood	State FL	Zip Code 33021
-------------------	-------------	-------------------

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 ▼
217.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241977

Amount of Each Receipt this Period
11.00

B. Ms. Beverly D. Davis
Full Name (Last, First, Middle Initial)
Mailing Address 1111 Turtle Creek Dr., Apt. B

City Greenville	State NC	Zip Code 27858
--------------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y
12	/	18	/	2014

Transaction ID : 4238010

Amount of Each Receipt this Period
125.00

C. Mr. Martin V. Davis
Full Name (Last, First, Middle Initial)
Mailing Address 3628 Foxwood Blvd.

City Wesley Chapel	State FL	Zip Code 33543
-----------------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4231474

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	186.00
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 366 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Patricia Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 Grafton Ct.
 City Rosedale State MD Zip Code 21237
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236449
 Amount of Each Receipt this Period
 200.00

B. Mr. John D. Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 1718 Hillview Dr
 City Jackson State MS Zip Code 39211
 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 ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233243
 Amount of Each Receipt this Period
 50.00

C. Ms. Merle L. Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 982 Miller Avenue
 City Berkeley State CA Zip Code 94708
 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 ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232795
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 367 OF 2648
	<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)
EMILY's List

A. Ms. Margaret B. Davis
Full Name (Last, First, Middle Initial)

Mailing Address 13500 N. Rancho Vistoso Blvd.
Apt... 426

City Oro Valley State AZ Zip Code 85755

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 ▼
550.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236573

Amount of Each Receipt this Period
50.00

B. Ms. Rita A Davis
Full Name (Last, First, Middle Initial)

Mailing Address 130 Pizarro Dr

City Hot Springs Village State AR Zip Code 71909

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 ▼
600.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232872

Amount of Each Receipt this Period
50.00

C. Ms. Norma Davis
Full Name (Last, First, Middle Initial)

Mailing Address 1308 Lasuen Drive

City Millbrae State CA Zip Code 94030

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 ▼
1300.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238494

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 368 OF 2648
	<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)
EMILY's List

A. Ms. Karen Davis
Full Name (Last, First, Middle Initial)
Mailing Address 4400 Belmont Park Ter Apt 135

City Nashville	State TN	Zip Code 37215
-------------------	-------------	-------------------

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

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

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
12	/	08	/	2014

Transaction ID : 4233049

Amount of Each Receipt this Period
125.00

B. Ms. Cheryl Davis
Full Name (Last, First, Middle Initial)
Mailing Address 10 Guilford Ct.

City Wilmington	State DE	Zip Code 19810
--------------------	-------------	-------------------

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

Name of Employer Temple University Hospital	Occupation Staff Rn
--	------------------------

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
12	/	01	/	2014

Transaction ID : 4230377

Amount of Each Receipt this Period
100.00

C. Vickie Davis
Full Name (Last, First, Middle Initial)
Mailing Address 2222 Butler Drive

City Friendswood	State TX	Zip Code 77546
---------------------	-------------	-------------------

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

Name of Employer The Woman's Hospital Of Texas	Occupation Pharmacist
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	14	/	2014

Transaction ID : 4235398

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	235.00
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 369 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Jeffrey Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 4738 NW 38th St
 City Gainesville State FL Zip Code 32605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Florida Law School Occupation Professor of Law
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239781
 Amount of Each Receipt this Period
 200.00

B. Ms. Lois Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 2527 Norfolk Road
 City Cleveland Heights State OH Zip Code 44106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233628
 Amount of Each Receipt this Period
 15.00

C. Ms. Jean Davison
 Full Name (Last, First, Middle Initial)
 Mailing Address 262 Larkspur Plaza Dr.
 City Larkspur State CA Zip Code 94939
 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 ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4233824
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 370 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Dixie L. Dawe
 Full Name (Last, First, Middle Initial)
 Mailing Address 3552 West Camelot Lane
 PO Box 250
 City Fremont State MI Zip Code 49412
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230379
 Amount of Each Receipt this Period
 100.00

B. Nancy Dawley
 Full Name (Last, First, Middle Initial)
 Mailing Address 7497 Hosbrook Rd.
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228661
 Amount of Each Receipt this Period
 50.00

C. Nancy Dawley
 Full Name (Last, First, Middle Initial)
 Mailing Address 7497 Hosbrook Rd.
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241428
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 371 OF 2648
	<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)
EMILY's List

A. Ms. Gale Dawson
Full Name (Last, First, Middle Initial)
Mailing Address 29480 Parkside St
City Farmington Hills State MI Zip Code 48331
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Legal Asst.
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 280.00

Date of Receipt 12 / 08 / 2014
Transaction ID : 4233625
Amount of Each Receipt this Period 15.00

B. Gail De Luca
Full Name (Last, First, Middle Initial)
Mailing Address 5 Terrace Drive
City Hastings On Hudson State NY Zip Code 10706
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 220.00

Date of Receipt 12 / 31 / 2014
Transaction ID : 4243330
Amount of Each Receipt this Period 15.00

C. Gail De Luca
Full Name (Last, First, Middle Initial)
Mailing Address 5 Terrace Drive
City Hastings On Hudson State NY Zip Code 10706
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 220.00

Date of Receipt 12 / 15 / 2014
Transaction ID : 4236437
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 372 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Judith De Luce
 Full Name (Last, First, Middle Initial)
 Mailing Address 46 Scarlet Oak Cir
 City Oxford State OH Zip Code 45056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 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
 12 / 08 / 2014
Transaction ID : 4233073
 Amount of Each Receipt this Period
150.00

B. Barbara De Rosa-Joynt
 Full Name (Last, First, Middle Initial)
 Mailing Address 20546 Quarterpath Trace Cir
 City Potomac Falls State VA Zip Code 20165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U.S. Department of State Occupation Government
 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
 12 / 01 / 2014
Transaction ID : 4230380
 Amount of Each Receipt this Period
250.00

C. Dr. Darilyn H. Dealy
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 White Bridge Rd
 City Weaverville State NC Zip Code 28787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Carepartners Health Services Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **900.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236245
 Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....	450.00
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 373 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Teresa Deangelo

Mailing Address PO Box 62142

City State Zip Code
Santa Barbara CA 93160

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

Name of Employer Occupation
Alpha Phi Sorority House Mom

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2014

Transaction ID : 4239313

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Dr. Vivien M. DeBack

Mailing Address 5396 S Butterfield Way

City State Zip Code
Milwaukee WI 53221

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014

Transaction ID : 4238495

Amount of Each Receipt this Period
50.00

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

Mailing Address 501 Beverly Dr.

City State Zip Code
Beverly Hills CA 90212

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 ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 10 / 2014

Transaction ID : 4234457

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 374 OF 2648
	<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)
EMILY's List

A. Jan Debont
Full Name (Last, First, Middle Initial)

Mailing Address 501 Beverly Dr.

City Beverly Hills	State CA	Zip Code 90212
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	16	/	2014

Transaction ID : 4237286

Amount of Each Receipt this Period
350.00

B. Mr. Louis Dechiaro
Full Name (Last, First, Middle Initial)

Mailing Address 737 Wood Duck Ct.

City Middletown	State DE	Zip Code 19709
--------------------	-------------	-------------------

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

Name of Employer Us Navy	Occupation Phycist
-----------------------------	-----------------------

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
12	/	02	/	2014

Transaction ID : 4230983

Amount of Each Receipt this Period
100.00

C. Ms. Kathryn Decker
Full Name (Last, First, Middle Initial)

Mailing Address 1291 Winter Springs Lane

City Cordova	State TN	Zip Code 38016
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FEC ID number of contributing federal political committee. **C**

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

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
12	/	10	/	2014

Transaction ID : 4234516

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 375 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Dennis Dedecker

Mailing Address 3400 Central Avenue

City Bettendorf State IA Zip Code 52722

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239783

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
B. Ms. Genie Dee

Mailing Address 23245 Hutchinson Road

City Los Gatos State CA Zip Code 95033

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

Name of Employer Volunteer Center Of Santa Cruz County Occupation Program Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231780

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Ms. Eve Lynn Deegan

Mailing Address 714 Beech RD

City Salem State VA Zip Code 24153

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

Name of Employer Requested Occupation Requested

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
 12 / 12 / 2014
Transaction ID : 4235217

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 376 OF 2648
(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)
EMILY's List

A. R. Denise Degrazia
Full Name (Last, First, Middle Initial)
Mailing Address 822 Lees Ave

City Long Beach	State CA	Zip Code 90815
--------------------	-------------	-------------------

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

Name of Employer Csu Long Beach	Occupation Technician
------------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **298.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228663
 Amount of Each Receipt this Period **5.00**

B. R. Denise Degrazia
Full Name (Last, First, Middle Initial)
Mailing Address 822 Lees Ave

City Long Beach	State CA	Zip Code 90815
--------------------	-------------	-------------------

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

Name of Employer Csu Long Beach	Occupation Technician
------------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **298.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	30	/	2014

Transaction ID : 4229537
 Amount of Each Receipt this Period **5.00**

C. R. Denise Degrazia
Full Name (Last, First, Middle Initial)
Mailing Address 822 Lees Ave

City Long Beach	State CA	Zip Code 90815
--------------------	-------------	-------------------

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

Name of Employer Csu Long Beach	Occupation Technician
------------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **298.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	12	/	2014

Transaction ID : 4235897
 Amount of Each Receipt this Period **5.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **15.00**

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 377 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. R. Denise Degrazia		Date of Receipt
Mailing Address 822 Lees Ave		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Long Beach	CA	90815
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4241823
Name of Employer Csu Long Beach		Amount of Each Receipt this Period
Occupation Technician		<input type="text" value="5.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="298.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. R. Denise Degrazia		Date of Receipt
Mailing Address 822 Lees Ave		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Long Beach	CA	90815
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4243302
Name of Employer Csu Long Beach		Amount of Each Receipt this Period
Occupation Technician		<input type="text" value="5.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="298.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Edward Deis		Date of Receipt
Mailing Address 9447 Villas Dr.		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
Foley	AL	36535
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4242524
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="700.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="110.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 378 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Eric Deitchman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236884
Mailing Address 1824 Asheville Pl		Amount of Each Receipt this Period 10.00
City Charlotte	State NC	Zip Code 28203
FEC ID number of contributing federal political committee. C	Name of Employer Deitchman Associates	Occupation Psychologist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary E. Dejong		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230381
Mailing Address 1882 18th Ave.		Amount of Each Receipt this Period 98.00
City San Francisco	State CA	Zip Code 94122
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 ▼ 786.00	

Full Name (Last, First, Middle Initial) C. Ms. Patricia DeLaChapelle		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237501
Mailing Address 5018 Jones Rd		Amount of Each Receipt this Period 60.00
City Oak Harbor	State WA	Zip Code 98277
FEC ID number of contributing federal political committee. C	Name of Employer REQUESTED	Occupation REQUESTED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	168.00
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 379 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susanne A. Delahunty		Date of Receipt
Mailing Address 26130 Feathersound Dr.		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Punta Gorda	FL	33955
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	
		Transaction ID : 4228665
		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Susanne A. Delahunty		Date of Receipt
Mailing Address 26130 Feathersound Dr.		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Punta Gorda	FL	33955
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	
		Transaction ID : 4241979
		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Barbara Delano		Date of Receipt
Mailing Address 200 A Springmeadow Drive		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Holbrook	NY	11741
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="265.00"/>	
		Transaction ID : 4229535
		Amount of Each Receipt this Period
		<input type="text" value="5.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="25.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 380 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Barbara Delano
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 A Springmeadow Drive
 City Holbrook State NY Zip Code 11741
 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 ▼ 265.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241701
 Amount of Each Receipt this Period
 5.00

B. Ms. Barbara J. Dellelmo
 Full Name (Last, First, Middle Initial)
 Mailing Address 2038 Palm St Spc 430
 City Las Vegas State NV Zip Code 89104
 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 ▼ 706.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234649
 Amount of Each Receipt this Period
 150.00

C. Mr. Peter J. Delmonte
 Full Name (Last, First, Middle Initial)
 Mailing Address 994 Woodgrove Dr
 City Cardiff State CA Zip Code 92007
 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 ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232867
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00
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 381 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Karen Deluca
 Full Name (Last, First, Middle Initial)
 Mailing Address 7116 Greenwood Ave N
 Unit #202
 City Seattle State WA Zip Code 98103
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234085
 Amount of Each Receipt this Period
 15.00

B. Ms. Karen Deluca
 Full Name (Last, First, Middle Initial)
 Mailing Address 7116 Greenwood Ave N
 Unit #202
 City Seattle State WA Zip Code 98103
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238498
 Amount of Each Receipt this Period
 15.00

C. Mr. Janet Dembinsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 1104 Valley View Road
 City Glenwood Springs State CO Zip Code 81601
 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 ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231648
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 382 OF 2648
	<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)
EMILY's List

A. Sylvia Demblkowski
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 640

City Morgan Hill State CA Zip Code 95038

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014

Transaction ID : 4227873

Amount of Each Receipt this Period
10.00

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

Mailing Address PO Box 640

City Morgan Hill State CA Zip Code 95038

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014

Transaction ID : 4240501

Amount of Each Receipt this Period
10.00

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

Mailing Address 2791 Emerson Street

City Palo Alto State CA Zip Code 94306

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

Name of Employer Requested Occupation Requested
 Renewable Energy Consulting Services, Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 4228667

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **45.00**

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 383 OF 2648
	<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)
EMILY's List

A. Edgar Demeo
Full Name (Last, First, Middle Initial)

Mailing Address 2791 Emerson Street

City Palo Alto State CA Zip Code 94306

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

Name of Employer Renewable Energy Consulting Services, Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241980

Amount of Each Receipt this Period
 25.00

B. Mrs. Joan Demorest
Full Name (Last, First, Middle Initial)

Mailing Address 361 Chestnut Avenue

City South Hackensack State NJ Zip Code 07606

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

Name of Employer REQUESTED Occupation Secretary

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
 12 / 03 / 2014
Transaction ID : 4231671

Amount of Each Receipt this Period
 25.00

C. Ms. Anne Demuth
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 82693

City Fairbanks State AK Zip Code 99708

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

Name of Employer Hamline University Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242897

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **65.00**

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 384 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anne Demuth		Date of Receipt
Mailing Address PO Box 82693		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
Fairbanks	AK	99708
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4235532
Name of Employer	Occupation	Amount of Each Receipt this Period
Hamline University	Professor	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="315.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Anne Demuth		Date of Receipt
Mailing Address PO Box 82693		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
Fairbanks	AK	99708
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4242896
Name of Employer	Occupation	Amount of Each Receipt this Period
Hamline University	Professor	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="315.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Jeanine Dendy		Date of Receipt
Mailing Address 2329 Hill Street		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Alexandria	LA	71301
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4230383
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 385 OF 2648
	<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)
EMILY's List

A. Ms. Walter B. Denley
Full Name (Last, First, Middle Initial)
Mailing Address 2546 Oakwood Trace

City Smyrna	State GA	Zip Code 30080
----------------	-------------	-------------------

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 ▼
1135.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2014

Transaction ID : 4233706

Amount of Each Receipt this Period

35.00

B. Ms. Walter B. Denley
Full Name (Last, First, Middle Initial)
Mailing Address 2546 Oakwood Trace

City Smyrna	State GA	Zip Code 30080
----------------	-------------	-------------------

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 ▼
1135.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2014

Transaction ID : 4236247

Amount of Each Receipt this Period

35.00

C. Dr. Janet L. Denlinger
Full Name (Last, First, Middle Initial)
Mailing Address 1040 Arcadian Way

City Fort Lee	State NJ	Zip Code 07024
------------------	-------------	-------------------

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

Name of Employer Matrix Biology Institute	Occupation Scientist
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2014

Transaction ID : 4236545

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....▶	570.00
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 386 OF 2648
	<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)
EMILY's List

A. Mr. Jeffrey L. Dennis
 Full Name (Last, First, Middle Initial)
 Mailing Address 1370 Shagbark Dr.
 City Des Plaines State IL Zip Code 60018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 29 / 2014
Transaction ID : 4229495
 Amount of Each Receipt this Period
 15.00

B. Ms. Hannah Dennison
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 8
 City Chelsea State VT Zip Code 05038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228671
 Amount of Each Receipt this Period
 25.00

C. Ms. Hannah Dennison
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 8
 City Chelsea State VT Zip Code 05038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241984
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 387 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Judith Denowitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 12000 N Bayshore Dr, 207
 City N Miami State FL Zip Code 33181
 Date of Receipt: 12 / 23 / 2014
Transaction ID : 4239787
 Amount of Each Receipt this Period: 50.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: None Occupation: Reataurateur
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 425.00

B. Mr. Albert Depaoli
 Full Name (Last, First, Middle Initial)
 Mailing Address 333 Bellevue Way SE,#9
 City Bellevue State WA Zip Code 98004
 Date of Receipt: 12 / 15 / 2014
Transaction ID : 4236732
 Amount of Each Receipt this Period: 50.00
 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: 600.00

c. Ms. Jennifer Depriest
 Full Name (Last, First, Middle Initial)
 Mailing Address 2161 W. Wilson Ave.
 City Chicago State IL Zip Code 60625
 Date of Receipt: 12 / 12 / 2014
Transaction ID : 4235316
 Amount of Each Receipt this Period: 375.00
 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: 625.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 475.00
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 388 OF 2648
	<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)
EMILY's List

A. Elisa Derbes Murphy
Full Name (Last, First, Middle Initial)

Mailing Address 6905 Circle Creek Drive

City Pinellas Park	State FL	Zip Code 33781
-----------------------	-------------	-------------------

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

Name of Employer Va	Occupation Systems Analyst
------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2014

Transaction ID : 4236248

Amount of Each Receipt this Period
15.00

B. Ms. Kathryn Dernham
Full Name (Last, First, Middle Initial)

Mailing Address 1030 Hollywood Ave

City Oakland	State CA	Zip Code 94602
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228672

Amount of Each Receipt this Period
50.00

c. Ms. Kathryn Dernham
Full Name (Last, First, Middle Initial)

Mailing Address 1030 Hollywood Ave

City Oakland	State CA	Zip Code 94602
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241430

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 389 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Kathryn Dernham

Mailing Address 1030 Hollywood Ave

City State Zip Code
Oakland CA 94602

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 ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239789

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Carolyn Dershem

Mailing Address 2760 NW 17th Street

City State Zip Code
Oklahoma City OK 73107

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

Name of Employer Occupation
Unknown Unknown

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
 12 / 17 / 2014
Transaction ID : 4237770

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
C. Ms. Beverly G. Deshler

Mailing Address 6762 McCormick Woods Dr SW

City State Zip Code
Port Orchard WA 98367

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
363.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237510

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00

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 390 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Myra Detate

Mailing Address 1401 El Norte Pkwy Sp 81

City San Marcos	State CA	Zip Code 92069
--------------------	-------------	-------------------

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

Name of Employer System Support Group	Occupation Tax Preparer
--	----------------------------

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
 12 / 08 / 2014
Transaction ID : 4233690

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Ms. Charlene Deutschman

Mailing Address 1228 Rossmoor Pkwy.Apt 113

City Walnut Creek	State CA	Zip Code 94595
----------------------	-------------	-------------------

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 ▼ **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232421

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Dr. Jane E Devens

Mailing Address 18251 Rosa P Ct

City North Fort Myers	State FL	Zip Code 33917
--------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **874.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236845

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 391 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ellen Devlin
Full Name (Last, First, Middle Initial)

Mailing Address 733 Turnpike Street
Pmb 287

City North Andover State MA Zip Code 01845

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

Name of Employer Rsi Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2014

Transaction ID : 4228356

Amount of Each Receipt this Period
27.00

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

Mailing Address 733 Turnpike Street
Pmb 287

City North Andover State MA Zip Code 01845

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

Name of Employer Rsi Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2014

Transaction ID : 4242787

Amount of Each Receipt this Period
27.00

C. Caroline Smith Dewaal
Full Name (Last, First, Middle Initial)

Mailing Address 9504 Warren Street

City Silver Spring State MD Zip Code 20910

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

Name of Employer Cspi Occupation Director

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 / 25 / 2014

Transaction ID : 4229702

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	104.00
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 392 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Caroline Smith Dewaal
 Full Name (Last, First, Middle Initial)
 Mailing Address 9504 Warren Street
 City Silver Spring State MD Zip Code 20910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cspi Occupation Director
 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
 12 / 23 / 2014
Transaction ID : 4239791
 Amount of Each Receipt this Period
 50.00

B. Ruth Dewey
 Full Name (Last, First, Middle Initial)
 Mailing Address 2202 Kendal Way
 City Sleepy Hollow State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237269
 Amount of Each Receipt this Period
 35.00

C. Ms. Joanna Dewey
 Full Name (Last, First, Middle Initial)
 Mailing Address 531 Harrison Ave
 City Claremont State CA Zip Code 91711
 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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228676
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 393 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joanna Dewey		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241988
Mailing Address 531 Harrison Ave		Amount of Each Receipt this Period 10.00
City Claremont	State CA	Zip Code 91711
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 ▼ 220.00	

Full Name (Last, First, Middle Initial) B. Ms. Jane E. Dewitt		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239792
Mailing Address 9 Wellesley Way		Amount of Each Receipt this Period 25.00
City Iowa City	State IA	Zip Code 52245
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

Full Name (Last, First, Middle Initial) C. Judith Dewitt		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228677
Mailing Address 19 South Crest Road		Amount of Each Receipt this Period 25.00
City Chattanooga	State TN	Zip Code 37404
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Independent Dance Artist And Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 394 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Judith Dewitt		Date of Receipt 12 / 28 / 2014 Transaction ID : 4241335
Mailing Address 19 South Crest Road		Amount of Each Receipt this Period 25.00
City Chattanooga	State TN	Zip Code 37404
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer Self	Occupation Independent Dance Artist And Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. Mr. Charles F. Dey		Date of Receipt 12 / 23 / 2014 Transaction ID : 4239575
Mailing Address PO Box 506		Amount of Each Receipt this Period 100.00
City Walpole	State NH	Zip Code 03608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 475.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C. Ms. Barbara Di Eugenio		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233643
Mailing Address 312 S. Lombard		Amount of Each Receipt this Period 15.00
City Oak Park	State IL	Zip Code 60302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 280.00
Name of Employer University Of Illinois	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 395 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Evelyn Di Maria
 Full Name (Last, First, Middle Initial)
 Mailing Address 3640 Bronx Blvd., Apt. 1a
 City Bronx State NY Zip Code 10467
 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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234762
 Amount of Each Receipt this Period
 35.00

B. Ms. Diane Dicarlo
 Full Name (Last, First, Middle Initial)
 Mailing Address 65 Wellesley Ave
 City Needham State MA Zip Code 02494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Hospitality
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234926
 Amount of Each Receipt this Period
 50.00

C. Ms. Yvonne M. Dicarlo
 Full Name (Last, First, Middle Initial)
 Mailing Address 10355 Cr 160
 City Salida State CO Zip Code 81201
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237208
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 396 OF 2648
	<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)
EMILY's List

A. Prof. Cipa Dichter
Full Name (Last, First, Middle Initial)
Mailing Address 145 Central Park West
City New York State NY Zip Code 10023
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Concert Pianist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : 4232745
Amount of Each Receipt this Period
20.00

B. Ms. Barbara Dicicco-Bloom
Full Name (Last, First, Middle Initial)
Mailing Address 3 Woodmeadow Ln.
City Princeton Junction State NJ Zip Code 08550
FEC ID number of contributing federal political committee. **C**
Name of Employer City University of New York Occupation Nurse Professor
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
12 / 04 / 2014
Transaction ID : 4232216
Amount of Each Receipt this Period
100.00

C. Ms. Ruth Dick
Full Name (Last, First, Middle Initial)
Mailing Address 3560 Redwood Ave.
City Los Angeles State CA Zip Code 90066
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 ▼ 520.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2014
Transaction ID : 4236249
Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 397 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Ruth Dickler
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 E 81st St Apt 12C
 City New York State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 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
 12 / 11 / 2014
Transaction ID : 4234848
 Amount of Each Receipt this Period
 250.00

B. Ms. Mary Diedel
 Full Name (Last, First, Middle Initial)
 Mailing Address 650 SW 26 Road
 City Miami State FL Zip Code 33129
 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 ▼ 535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228679
 Amount of Each Receipt this Period
 40.00

C. Ms. Mary Diedel
 Full Name (Last, First, Middle Initial)
 Mailing Address 650 SW 26 Road
 City Miami State FL Zip Code 33129
 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 ▼ 535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241990
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.00
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 398 OF 2648
	<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)
EMILY's List

A. Mr. Jerome H. Diederichs
Full Name (Last, First, Middle Initial)

Mailing Address N8875 Gladstone Beach Rd.

City Fond Du Lac	State WI	Zip Code 54937
---------------------	-------------	-------------------

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 ▼
330.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		26		2014

Transaction ID : 4227674

Amount of Each Receipt this Period
300.00

B. Ms. Elizabeth Dietrich
Full Name (Last, First, Middle Initial)

Mailing Address 307 4th St

City Sausalito	State CA	Zip Code 94965
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		03		2014

Transaction ID : 4231998

Amount of Each Receipt this Period
20.00

C. Mrs. L. Dietrichson
Full Name (Last, First, Middle Initial)

Mailing Address 231 Sult Rd.

City Millville	State PA	Zip Code 17846
-------------------	-------------	-------------------

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

Name of Employer Milton Area SD	Occupation Teacher
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		08		2014

Transaction ID : 4233066

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 399 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Maria Rita Difrangia
 Full Name (Last, First, Middle Initial)
 Mailing Address 4182 Wood Park Drive
 City Stow State OH Zip Code 44224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **254.00**

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231563
 Amount of Each Receipt this Period
10.00

B. Virginia Dike
 Full Name (Last, First, Middle Initial)
 Mailing Address 918 Tuscany Dr
 City Streamwood State IL Zip Code 60107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Nigeria Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **665.00**

Date of Receipt
 12 / 14 / 2014
Transaction ID : 4235432
 Amount of Each Receipt this Period
15.00

C. Virginia Dike
 Full Name (Last, First, Middle Initial)
 Mailing Address 918 Tuscany Dr
 City Streamwood State IL Zip Code 60107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Nigeria Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **665.00**

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4238500
 Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... **40.00**
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 400 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Virginia Dike		Date of Receipt 11 / 28 / 2014 Transaction ID : 4228680
Mailing Address 918 Tuscany Dr		Amount of Each Receipt this Period 50.00
City Streamwood	State IL	Zip Code 60107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer University Of Nigeria	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00	

Full Name (Last, First, Middle Initial) B. Virginia Dike		Date of Receipt 12 / 28 / 2014 Transaction ID : 4241645
Mailing Address 918 Tuscany Dr		Amount of Each Receipt this Period 50.00
City Streamwood	State IL	Zip Code 60107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer University Of Nigeria	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00	

Full Name (Last, First, Middle Initial) C. Ms. Lori Huff Dillman		Date of Receipt 12 / 22 / 2014 Transaction ID : 4244899
Mailing Address 510 Palmetto Dr.		Amount of Each Receipt this Period 35.00
City Pasadena	State CA	Zip Code 91105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Self	Occupation Writer / Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 401 OF 2648
	<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	

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)
EMILY's List

A. M. S. Dillon III
Full Name (Last, First, Middle Initial)

Mailing Address 4100 Malaga Ave

City Coconut Grove	State FL	Zip Code 33133
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	05	/	2014

Transaction ID : 4232629

Amount of Each Receipt this Period
50.00

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

Mailing Address 321 Northridge Ave

City Bolingbrook	State IL	Zip Code 60440
---------------------	-------------	-------------------

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

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

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
11	/	26	/	2014

Transaction ID : 4227680

Amount of Each Receipt this Period
100.00

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

Mailing Address 222 S. Evergreen Rd., Apt. 422

City Spokane Valley	State WA	Zip Code 99216
------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	26	/	2014

Transaction ID : 4227876

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 402 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ellen Dimond		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240780
Mailing Address 222 S. Evergreen Rd., Apt. 422		Amount of Each Receipt this Period 30.00
City Spokane Valley	State WA	Zip Code 99216
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) B. Mr. James A. Dingus , Jr.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4226719
Mailing Address 20600 Chagrin Blvd., Ste. 701		Amount of Each Receipt this Period 26.28
City Beachwood	State OH	Zip Code 44122
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 327.77	

Full Name (Last, First, Middle Initial) C. Mr. James A. Dingus , Jr.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240866
Mailing Address 20600 Chagrin Blvd., Ste. 701		Amount of Each Receipt this Period 43.33
City Beachwood	State OH	Zip Code 44122
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 327.77	

SUBTOTAL of Receipts This Page (optional).....▶	99.61
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 403 OF 2648
	<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)
EMILY's List

A. Ms. Kathryn Dinkin
Full Name (Last, First, Middle Initial)
Mailing Address 432 Foxen Dr.
City Santa Barbara State CA Zip Code 93105
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 ▼ 338.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014
Transaction ID : 4230387
Amount of Each Receipt this Period
100.00

B. Ms. Estelle Disch
Full Name (Last, First, Middle Initial)
Mailing Address 528 Franklin Street
City Cambridge State MA Zip Code 02139
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 ▼ 1535.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4229777
Amount of Each Receipt this Period
100.00

C. Ms. Estelle Disch
Full Name (Last, First, Middle Initial)
Mailing Address 528 Franklin Street
City Cambridge State MA Zip Code 02139
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 ▼ 1535.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2014
Transaction ID : 4237291
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 404 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Estelle Disch
 Full Name (Last, First, Middle Initial)
 Mailing Address 528 Franklin Street
 City Cambridge State MA Zip Code 02139
 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 ▼ 1535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240855
 Amount of Each Receipt this Period
 100.00

B. Mr. Kent Dittmer
 Full Name (Last, First, Middle Initial)
 Mailing Address 2716 Blue Ridge Terrace
 City Winchester State VA Zip Code 22601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation 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
 12 / 19 / 2014
Transaction ID : 4238502
 Amount of Each Receipt this Period
 15.00

C. Mr. Kent Dittmer
 Full Name (Last, First, Middle Initial)
 Mailing Address 2716 Blue Ridge Terrace
 City Winchester State VA Zip Code 22601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation 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
 12 / 12 / 2014
Transaction ID : 4235815
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
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 405 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Louise Ditullio		Date of Receipt
Mailing Address D2lyo@Yahoo.Com		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Vida	OR	97488
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4243292
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="550.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. M. Susan Susan Ditzler		Date of Receipt
Mailing Address 24817 Santa Rita St.		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Carmel	CA	93923
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4235804
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="650.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Gloria Dixon , Ph.D.		Date of Receipt
Mailing Address 3821 Diamante Pl		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Encino	CA	91436
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4232648
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Psychologist	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="335.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="325.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 406 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Kathryn M. Dixon

Mailing Address 119 W 99th Ter Apt 119

City State Zip Code
Kansas City MO 64114

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4235010

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
B. Mr. Daniel Dixon

Mailing Address 112 Jackson Rd.

City State Zip Code
Mount Airy NC 27030

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2014
Transaction ID : 4237994

Amount of Each Receipt this Period
200.00

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

Mailing Address 105 Stateside Drive

City State Zip Code
Chapel Hill NC 27514

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 ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229653

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00

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 407 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Barbara Dobbin
 Full Name (Last, First, Middle Initial)
 Mailing Address 499 Danbury Road
 City Ridgefield State CT Zip Code 06877
 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 ▼ 300.00

Date of Receipt
 12 / 23 / 2014
Transaction ID : 4239795
 Amount of Each Receipt this Period
 25.00

B. Ms. Irene Dobbins
 Full Name (Last, First, Middle Initial)
 Mailing Address 350 Buckingham Way, Apt. 202
 City San Francisco State CA Zip Code 94132
 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 ▼ 425.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236522
 Amount of Each Receipt this Period
 75.00

C. Ms. Mary Ann Dobras
 Full Name (Last, First, Middle Initial)
 Mailing Address 725 N. Norris Av
 City Tucson State AZ Zip Code 85719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4238504
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	350.00
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 409 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Pamela Doherty

Mailing Address 401 east 74th street, Apt. 5R

City New York	State NY	Zip Code 10021
------------------	-------------	-------------------

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

Name of Employer Self	Occupation Lawyer
--------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	29	/	2014

Transaction ID : 4242517

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
B. Ms. Linda K. Dolan

Mailing Address 204 Montclair Road

City Los Gatos	State CA	Zip Code 95032
-------------------	-------------	-------------------

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

Name of Employer None	Occupation 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
12	/	18	/	2014

Transaction ID : 4238137

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. John R. Donaldson

Mailing Address 4559 N DeWitt

City Fresno	State CA	Zip Code 93727
----------------	-------------	-------------------

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

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

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
12	/	31	/	2014

Transaction ID : 4243377

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	500.00
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 411 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Mary S. Donovan
 Full Name (Last, First, Middle Initial)
 Mailing Address 152 Broadway, # 8
 City Dobbs Ferry State NY Zip Code 10522
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230987
 Amount of Each Receipt this Period
 150.00

B. Ms. Nena Donovan Levine
 Full Name (Last, First, Middle Initial)
 Mailing Address 645 Prospect Ave
 City Hartford State CT Zip Code 06105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Desinger
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239797
 Amount of Each Receipt this Period
 100.00

C. Ms. Audrey Dood
 Full Name (Last, First, Middle Initial)
 Mailing Address 801 S. Vista Point Dr., Apt. 306
 City Colfax State WA Zip Code 99111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228686
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	280.00
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 412 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Audrey Dood
 Full Name (Last, First, Middle Initial)
 Mailing Address 801 S. Vista Point Dr., Apt. 306
 City Colfax State WA Zip Code 99111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236250
 Amount of Each Receipt this Period
 30.00

B. Ms. Audrey Dood
 Full Name (Last, First, Middle Initial)
 Mailing Address 801 S. Vista Point Dr., Apt. 306
 City Colfax State WA Zip Code 99111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241995
 Amount of Each Receipt this Period
 30.00

C. Mr. Miles G. Doolittle
 Full Name (Last, First, Middle Initial)
 Mailing Address 2892 Spanish Cove Dr. N.
 City Lillian State AL Zip Code 36549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230389
 Amount of Each Receipt this Period
 90.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 413 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Cathy K. Dorson
 Full Name (Last, First, Middle Initial)
 Mailing Address 7739 E. Broadway Blvd.
 City Tucson State AZ Zip Code 85710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236251
 Amount of Each Receipt this Period
 18.00

B. Mr. Eddie H. Doss
 Full Name (Last, First, Middle Initial)
 Mailing Address 905 High Rigger Ct.
 City Nashville State TN Zip Code 37217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Resource Tek Llc Mechanical Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230391
 Amount of Each Receipt this Period
 150.00

C. Kellie Doucette
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Rolling Hill Drive
 City Chatham State NJ Zip Code 07928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 None None
 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
 12 / 24 / 2014
Transaction ID : 4240258
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	268.00
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 414 OF 2648
	<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)
EMILY's List

A. Anne Dougherty
Full Name (Last, First, Middle Initial)

Mailing Address 20 Comstock Ave.
Apt. 3a

City Ivoryton State CT Zip Code 06442

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233391

Amount of Each Receipt this Period
25.00

B. Ms. Delores Douglas
Full Name (Last, First, Middle Initial)

Mailing Address 63330 E. Harmony Dr.

City Tucson State AZ Zip Code 85739

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 ▼
380.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233035

Amount of Each Receipt this Period
150.00

C. Mrs. Ashton S. Douglass
Full Name (Last, First, Middle Initial)

Mailing Address 1225 Independence Avenue SE

City Washington State DC Zip Code 20003

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
12 / 12 / 2014
Transaction ID : 4236011

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 195.00

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 415 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Lee Dowling
Full Name (Last, First, Middle Initial)

Mailing Address 2225 W. Frye Rd., Apt. 1111

City Chandler	State AZ	Zip Code 85224
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234257

Amount of Each Receipt this Period
 10.00

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

Mailing Address 2225 W. Frye Rd., Apt. 1111

City Chandler	State AZ	Zip Code 85224
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228687

Amount of Each Receipt this Period
 15.00

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

Mailing Address 2225 W. Frye Rd., Apt. 1111

City Chandler	State AZ	Zip Code 85224
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241996

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 416 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Laraine Downer		Date of Receipt
Mailing Address PO Box 2383		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Santa Rosa	CA	95405
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4234520
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1100.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Vesta S. Downer		Date of Receipt
Mailing Address 509 Hillwood Ave		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Falls Church	VA	22042
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4226698
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="1200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2700.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth Downs		Date of Receipt
Mailing Address PO Box 531131		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Birmingham	AL	35253
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4238507
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="375.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1325.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 417 OF 2648
	<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)
EMILY's List

A. Mrs. Janice Doxtator
Full Name (Last, First, Middle Initial)
Mailing Address 1909 Plover St.
City Stevens Point State WI Zip Code 54481
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 ▼ 400.00

Date of Receipt
12 / 09 / 2014
Transaction ID : 4233749
Amount of Each Receipt this Period
200.00

B. Connie Doyle
Full Name (Last, First, Middle Initial)
Mailing Address 1259 Spinnaker Place
City Wilmington State OH Zip Code 45177
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00

Date of Receipt
12 / 16 / 2014
Transaction ID : 4237173
Amount of Each Receipt this Period
25.00

C. Ms. Linda Doyle
Full Name (Last, First, Middle Initial)
Mailing Address 224 Mountain Rd.
City Woolwich State ME Zip Code 04579
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 570.00

Date of Receipt
11 / 25 / 2014
Transaction ID : 4229811
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 418 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Linda Doyle
 Full Name (Last, First, Middle Initial)
 Mailing Address 224 Mountain Rd.
 City Woolwich State ME Zip Code 04579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00
 Date of Receipt 12 / 26 / 2014
Transaction ID : 4240765
 Amount of Each Receipt this Period 25.00

B. Ms. Linda Doyle
 Full Name (Last, First, Middle Initial)
 Mailing Address 224 Mountain Rd.
 City Woolwich State ME Zip Code 04579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00
 Date of Receipt 11 / 28 / 2014
Transaction ID : 4228688
 Amount of Each Receipt this Period 35.00

C. Ms. Linda Doyle
 Full Name (Last, First, Middle Initial)
 Mailing Address 224 Mountain Rd.
 City Woolwich State ME Zip Code 04579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00
 Date of Receipt 12 / 28 / 2014
Transaction ID : 4241431
 Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 419 OF 2648
	<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)
EMILY's List

A. Mrs. Beverly Carolan Doyle
Full Name (Last, First, Middle Initial)
Mailing Address 211 Great Pond Road

City Simsbury	State CT	Zip Code 06070
------------------	-------------	-------------------

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

Name of Employer St Francis Hospital	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	30	/	2014

Transaction ID : 4229629

Amount of Each Receipt this Period
100.00

B. Mrs. Beverly Carolan Doyle
Full Name (Last, First, Middle Initial)
Mailing Address 211 Great Pond Road

City Simsbury	State CT	Zip Code 06070
------------------	-------------	-------------------

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

Name of Employer St Francis Hospital	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	27	/	2014

Transaction ID : 4241027

Amount of Each Receipt this Period
100.00

C. Ms. Marianne Dozier
Full Name (Last, First, Middle Initial)
Mailing Address 813 N. Harper Ave.

City Los Angeles	State CA	Zip Code 90046
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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 ▼
218.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	19	/	2014

Transaction ID : 4238508

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....▶	215.00
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 420 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anne L. Draznin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233355
Mailing Address 1122 W Edwards Stapt 2505		Amount of Each Receipt this Period 35.00
City Springfield	State IL	Zip Code 62704
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 ▼ 285.00	

Full Name (Last, First, Middle Initial) B. Ms. Anne L. Draznin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230393
Mailing Address 1122 W Edwards Stapt 2505		Amount of Each Receipt this Period 75.00
City Springfield	State IL	Zip Code 62704
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 ▼ 285.00	

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth Drew		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227462
Mailing Address 225 E 36th St., Apt. 6F Apt 6F		Amount of Each Receipt this Period 125.00
City New York	State NY	Zip Code 10016
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	235.00
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 421 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Laurie A. Drews
 Full Name (Last, First, Middle Initial)
 Mailing Address 611 Rochelle Ct
 City Rogers State AR Zip Code 72758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230114
 Amount of Each Receipt this Period
 25.00

B. Ms. Laurie A. Drews
 Full Name (Last, First, Middle Initial)
 Mailing Address 611 Rochelle Ct
 City Rogers State AR Zip Code 72758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240742
 Amount of Each Receipt this Period
 25.00

C. Ms. Pamela N. Drexel
 Full Name (Last, First, Middle Initial)
 Mailing Address 303 East 57th Street
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237325
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 422 OF 2648
	<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)
EMILY's List

A. Lionel Dripps
Full Name (Last, First, Middle Initial)

Mailing Address 1315 W St NW Apt 653

City Washington State DC Zip Code 20009

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231921

Amount of Each Receipt this Period
25.00

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

Mailing Address 1350 Ridgefield Cir

City Carol Stream State IL Zip Code 60188

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239799

Amount of Each Receipt this Period
10.00

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

Mailing Address 1350 Ridgefield Cir

City Carol Stream State IL Zip Code 60188

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229640

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **70.00**

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 423 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Espy Driscoll

Mailing Address 5712 Foggy Ln.

City Derwood State MD Zip Code 20855

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014
Transaction ID : 4238239

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Penelope B. Drooker

Mailing Address 7 Marden Way

City Durham State NH Zip Code 03824

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 ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2014
Transaction ID : 4231502

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
C. Ms. Sheree A. Drummond

Mailing Address 2665 Velvet Way

City Walnut Creek State CA Zip Code 94596

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

Name of Employer Chevron Corp Occupation It Professional

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
760.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014
Transaction ID : 4243502

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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 424 OF 2648
	<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)
EMILY's List

A. Ms. Mary Drummond
Full Name (Last, First, Middle Initial)
Mailing Address 6 Colgate Ct.
City Woodland State CA Zip Code 95695
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 ▼ 450.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233271
Amount of Each Receipt this Period
200.00

B. Ms. Edith K. Drury
Full Name (Last, First, Middle Initial)
Mailing Address 3432 Cobb Hill Rd
City Waterbury State VT Zip Code 05676
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
11 / 25 / 2014
Transaction ID : 4229748
Amount of Each Receipt this Period
10.00

C. Ms. Edith K. Drury
Full Name (Last, First, Middle Initial)
Mailing Address 3432 Cobb Hill Rd
City Waterbury State VT Zip Code 05676
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238510
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	220.00
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 425 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Edith K. Drury
 Full Name (Last, First, Middle Initial)
 Mailing Address 3432 Cobb Hill Rd
 City Waterbury State VT Zip Code 05676
 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240585
 Amount of Each Receipt this Period
 10.00

B. Kelly Dryden
 Full Name (Last, First, Middle Initial)
 Mailing Address 1216 Augusta St
 City Charlottesville State VA Zip Code 22903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 University Of Virginia Scientist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235463
 Amount of Each Receipt this Period
 25.00

C. Yolanda J. Dubois
 Full Name (Last, First, Middle Initial)
 Mailing Address 3031 Federal Hill Dr.
 City Falls Church State VA Zip Code 22044
 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 ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231315
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
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 426 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mabel Dudeney			Date of Receipt
Mailing Address 170 Winfield St			<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4233554
Norwalk	CT	06855	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
REQUESTED	REQUESTED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Mabel Dudeney			Date of Receipt
Mailing Address 170 Winfield St			<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4237619
Norwalk	CT	06855	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
REQUESTED	REQUESTED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Judy Dudley			Date of Receipt
Mailing Address 349 Arthur Ave			<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4242653
Aptos	CA	95003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
Santa Cruz County Superior Court	Legal Clerk		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 427 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Patricia Dugan-Perlmuth
 Full Name (Last, First, Middle Initial)
 Mailing Address 880 Fifth Ave
 14g
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239101
 Amount of Each Receipt this Period
 10.00

B. Dr. Wendy L. Duignan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1945 W River Rd.
 City Grand Island State NY Zip Code 14072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Niagara University Occupation University Professor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234100
 Amount of Each Receipt this Period
 15.00

C. Ms. Gretchen T. Dumas
 Full Name (Last, First, Middle Initial)
 Mailing Address 1749 Pleasant Valley Ave
 City Oakland State CA Zip Code 94611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 370.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241220
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 428 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Marilyn Dume		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239800
Mailing Address 500 Pine Hill Rd,		Amount of Each Receipt this Period 100.00
City Leonia	State NJ	Zip Code 07605
FEC ID number of contributing federal political committee. C		
Name of Employer Owner	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Don E. Dumond		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237172
Mailing Address 95 Carriage Dr Apt 7		Amount of Each Receipt this Period 15.00
City Orchard Park	State NY	Zip Code 14127
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 ▼ 555.00	

Full Name (Last, First, Middle Initial) C. Robert Duncan		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237329
Mailing Address 244 S. 46th Street		Amount of Each Receipt this Period 35.00
City Philadelphia	State PA	Zip Code 19139
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 429 OF 2648
	<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)
EMILY's List

A. Norine Duncan
Full Name (Last, First, Middle Initial)
Mailing Address 208 Lowden St
City Pawtucket State RI Zip Code 02860
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 ▼ 353.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231988
Amount of Each Receipt this Period 25.00

B. Mr. Douglas Dunham
Full Name (Last, First, Middle Initial)
Mailing Address 1136 Mississippi Ave.
City Duluth State MN Zip Code 55811
FEC ID number of contributing federal political committee. **C**
Name of Employer University Of Minnesota Occupation Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt
12 / 16 / 2014
Transaction ID : 4237285
Amount of Each Receipt this Period 50.00

c. Julie Dunlap
Full Name (Last, First, Middle Initial)
Mailing Address 20 Gavilan Rd.
City Santa Fe State NM Zip Code 87508
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Landscape Designer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236636
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 430 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Julie Dunlap
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Gavilan Rd.
 City Santa Fe State NM Zip Code 87508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Landscape Designer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237180
 Amount of Each Receipt this Period
 15.00

B. Julie Dunlap
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Gavilan Rd.
 City Santa Fe State NM Zip Code 87508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Landscape Designer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237181
 Amount of Each Receipt this Period
 15.00

C. Ms. Rita M. Dunlop
 Full Name (Last, First, Middle Initial)
 Mailing Address 13366 Oak Ridge Lane
 City Chelsea State MI Zip Code 48118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235480
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 431 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Rita M. Dunlop
 Full Name (Last, First, Middle Initial)
 Mailing Address 13366 Oak Ridge Lane
 City Chelsea State MI Zip Code 48118
 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 ▼
 855.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231743
 Amount of Each Receipt this Period
 50.00

B. Mr. Colin Wallace Dunn
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 Ferncliff Ter.
 City Short Hills State NJ Zip Code 07078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230398
 Amount of Each Receipt this Period
 75.00

C. Ms. Sarah Hawley Dunning
 Full Name (Last, First, Middle Initial)
 Mailing Address 9239 Hathaway Street
 City Dallas State TX Zip Code 75220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Interior Designer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237991
 Amount of Each Receipt this Period
 1200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1325.00
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 432 OF 2648
	<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)
EMILY's List

A. Ms. Leslie Dunsworth
Full Name (Last, First, Middle Initial)
Mailing Address 8 Milan Court
City Sacramento State CA Zip Code 95831
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **345.00**

Date of Receipt **12 / 13 / 2014**
Transaction ID : 4236253
Amount of Each Receipt this Period **25.00**

B. Wesley Duran
Full Name (Last, First, Middle Initial)
Mailing Address 83 Access Road 84a
City Twin Lakes State CO Zip Code 81251
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 **300.00**

Date of Receipt **12 / 19 / 2014**
Transaction ID : 4238515
Amount of Each Receipt this Period **25.00**

c. Mary Jo Durand
Full Name (Last, First, Middle Initial)
Mailing Address 1500 SW Park Ave #329
City Portland State OR Zip Code 97201
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 17 / 2014**
Transaction ID : 4237922
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **150.00**
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 433 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Rita T. Durand
 Full Name (Last, First, Middle Initial)
 Mailing Address 7129 Juniper Drive
 City Everett State WA Zip Code 98203
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4233744
 Amount of Each Receipt this Period
 200.00

B. Jeffrey Durbin
 Full Name (Last, First, Middle Initial)
 Mailing Address 2736 Coneflower Ct
 City Lawrence State KS Zip Code 66047
 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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234101
 Amount of Each Receipt this Period
 15.00

C. Ms. Eugenia M. Durdall
 Full Name (Last, First, Middle Initial)
 Mailing Address 1812 Edgewood Ln.
 City Menlo Park State CA Zip Code 94025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242540
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	365.00
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 434 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Susanne Durling
 Full Name (Last, First, Middle Initial)
 Mailing Address 661 W. Calle Torres Blancas Apt. 1
 City Green Valley State AZ Zip Code 85614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228699
 Amount of Each Receipt this Period
 50.00

B. Susanne Durling
 Full Name (Last, First, Middle Initial)
 Mailing Address 661 W. Calle Torres Blancas Apt. 1
 City Green Valley State AZ Zip Code 85614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241433
 Amount of Each Receipt this Period
 50.00

C. Mr. Darren L. Dye
 Full Name (Last, First, Middle Initial)
 Mailing Address 1404 N. Broadway
 City Indianapolis State IN Zip Code 46202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Of Indiana Occupation Policy Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228322
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 435 OF 2648
	<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)
EMILY's List

A. Mr. Darren L. Dye
Full Name (Last, First, Middle Initial)

Mailing Address 1404 N. Broadway
C

City Indianapolis State IN Zip Code 46202

FEC ID number of contributing federal political committee. C

Name of Employer State Of Indiana Occupation Policy Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2014

Transaction ID : 4241166

Amount of Each Receipt this Period
15.00

B. Ms. Ellen C. Eagan
Full Name (Last, First, Middle Initial)

Mailing Address 344 Santa Paula Avenue

City Millbrae State CA Zip Code 94030

FEC ID number of contributing federal political committee. C

Name of Employer Ucsf Medical Center Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2014

Transaction ID : 4239092

Amount of Each Receipt this Period
30.00

C. Ms. Patricia E. Eames
Full Name (Last, First, Middle Initial)

Mailing Address 3300 Darby Rd Apt 5313

City Haverford State PA Zip Code 19041

FEC ID number of contributing federal political committee. C

Name of Employer None Occupation None

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
11 / 27 / 2014

Transaction ID : 4228404

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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 436 OF 2648
	<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)
EMILY's List

A. Ms. Vickie Eastman
Full Name (Last, First, Middle Initial)

Mailing Address 5698 Park Place East
Suite 150

City Salt Lake City State UT Zip Code 84121

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232639

Amount of Each Receipt this Period
15.00

B. Ms. Vickie Eastman
Full Name (Last, First, Middle Initial)

Mailing Address 5698 Park Place East
Suite 150

City Salt Lake City State UT Zip Code 84121

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
12 / 27 / 2014
Transaction ID : 4240993

Amount of Each Receipt this Period
15.00

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

Mailing Address 2551 Mardell Way

City Mountain View State CA Zip Code 94043

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

Name of Employer Google Inc Occupation Software Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
12 / 13 / 2014
Transaction ID : 4236197

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1030.00

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 437 OF 2648
	<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)
EMILY's List

A. Mr. Curtis J. Eaton
Full Name (Last, First, Middle Initial)
Mailing Address 622 Hall Blvd
City Mason State MI Zip Code 48854
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 ▼ 605.00

Date of Receipt 11 / 27 / 2014
Transaction ID : 4228340
Amount of Each Receipt this Period 30.00

B. Mr. Curtis J. Eaton
Full Name (Last, First, Middle Initial)
Mailing Address 622 Hall Blvd
City Mason State MI Zip Code 48854
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 ▼ 605.00

Date of Receipt 12 / 27 / 2014
Transaction ID : 4241178
Amount of Each Receipt this Period 30.00

c. Dr. Olga M. Eaton
Full Name (Last, First, Middle Initial)
Mailing Address 1001 Sandia Road N.W.
City Albuquerque State NM Zip Code 87107
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 ▼ 4575.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4231992
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 438 OF 2648
	<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)
EMILY's List

A. Dr. Olga M. Eaton
Full Name (Last, First, Middle Initial)

Mailing Address 1001 Sandia Road N.W.

City Albuquerque State NM Zip Code 87107

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 ▼
4575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014

Transaction ID : 4233738

Amount of Each Receipt this Period
 100.00

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

Mailing Address 1646 Stone Chapel Rd

City New Windsor State MD Zip Code 21776

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

Name of Employer Self Occupation Real Estate Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014

Transaction ID : 4231835

Amount of Each Receipt this Period
 20.00

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

Mailing Address 3909 Vale Ave.

City Oakland State CA Zip Code 94619

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

Name of Employer None Occupation 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
 12 / 25 / 2014

Transaction ID : 4240251

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	370.00
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 439 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Carolyn F. Eckel
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 33707
 City Portland State OR Zip Code 97292
 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 ▼ 450.00

Date of Receipt
 12 / 05 / 2014
Transaction ID : 4232299
 Amount of Each Receipt this Period
 150.00

B. Ms. Miriam Edelman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2133 Swift Blvd.
 City Houston State TX Zip Code 77030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Psychotherapist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 12 / 01 / 2014
Transaction ID : 4230402
 Amount of Each Receipt this Period
 200.00

C. Ms. Carole Edelstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 12305 4th Helena Drive
 City Los Angeles State CA Zip Code 90049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation M.D.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 12 / 12 / 2014
Transaction ID : 4236395
 Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 440 OF 2648
	<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)
EMILY's List

A. Mr. Bert T. Edwards
Full Name (Last, First, Middle Initial)
Mailing Address 3 Briarcliffe CT
City Ocean View State DE Zip Code 19970
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **750.00**

Date of Receipt **11 / 26 / 2014**
Transaction ID : 4227687
Amount of Each Receipt this Period **150.00**

B. Ms. Geraldine E. Edwards
Full Name (Last, First, Middle Initial)
Mailing Address 2214 NW 20th Ct
City Gainesville State FL Zip Code 32605
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 **260.00**

Date of Receipt **11 / 26 / 2014**
Transaction ID : 4227744
Amount of Each Receipt this Period **25.00**

C. Ms. Margaret L. Edwards
Full Name (Last, First, Middle Initial)
Mailing Address 1423 Neptune Ave
City Encinitas State CA Zip Code 92024
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 **300.00**

Date of Receipt **12 / 10 / 2014**
Transaction ID : 4234387
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **275.00**
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 441 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Caren Edwards

Mailing Address 10 Shepherd Way

City State Zip Code
Belvedere Tiburon CA 94920

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

Name of Employer Occupation
Self Employed Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232446

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Ms. Faye C. Edwards

Mailing Address 115 Sunset Dr.

City State Zip Code
Gaffney SC 29340

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

Name of Employer Occupation
Requested Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234316

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Ms. Pauline M. Edwards-Delaney

Mailing Address 4718 Hallmark Dr Apt 351

City State Zip Code
Houston TX 77056

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

Name of Employer Occupation
Requested Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236460

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00

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 442 OF 2648
	<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)
EMILY's List

A. Ms. Lynne M Eggers
Full Name (Last, First, Middle Initial)
Mailing Address 221 Mullen Ave.
City San Francisco State CA Zip Code 94110
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.00

Date of Receipt
11 / 26 / 2014
Transaction ID : 4227881
Amount of Each Receipt this Period
15.00

B. Ms. Lynne M Eggers
Full Name (Last, First, Middle Initial)
Mailing Address 221 Mullen Ave.
City San Francisco State CA Zip Code 94110
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.00

Date of Receipt
12 / 17 / 2014
Transaction ID : 4237915
Amount of Each Receipt this Period
100.00

C. Elizabeth Ehrenfeld
Full Name (Last, First, Middle Initial)
Mailing Address 6 Shoreline Dr
City Falmouth State ME Zip Code 04105
FEC ID number of contributing federal political committee. **C**
Name of Employer Smcc Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
12 / 29 / 2014
Transaction ID : 4242474
Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1615.00
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 443 OF 2648
	<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)
EMILY's List

A. Ms. Sara Ehrman
Full Name (Last, First, Middle Initial)

Mailing Address 2122 California St. N.W., Apt. 656

City Washington	State DC	Zip Code 20008
--------------------	-------------	-------------------

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 ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	17	/	2014

Transaction ID : 4237431

Amount of Each Receipt this Period

100.00

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

Mailing Address 7330 Piney Branch Road

City Takoma Park	State MD	Zip Code 20912
---------------------	-------------	-------------------

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

Name of Employer University Of Maryland	Occupation Professor
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **372.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	14	/	2014

Transaction ID : 4235349

Amount of Each Receipt this Period

9.00

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

Mailing Address 7330 Piney Branch Road

City Takoma Park	State MD	Zip Code 20912
---------------------	-------------	-------------------

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

Name of Employer University Of Maryland	Occupation Professor
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **372.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4232066

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....▶	119.00
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 444 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ronit Eisenbach
 Full Name (Last, First, Middle Initial)
 Mailing Address 7330 Piney Branch Road
 City Takoma Park State MD Zip Code 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Maryland Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt
 11 / 30 / 2014
Transaction ID : 4229612
 Amount of Each Receipt this Period
 36.00

B. Ronit Eisenbach
 Full Name (Last, First, Middle Initial)
 Mailing Address 7330 Piney Branch Road
 City Takoma Park State MD Zip Code 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Maryland Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt
 12 / 28 / 2014
Transaction ID : 4241646
 Amount of Each Receipt this Period
 36.00

C. Ms. Robin I. Eisenberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 8226 Brookside Road
 City Elkins Park State PA Zip Code 19027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Manager, Learning And Development Occupation Pearson Vue
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 12 / 12 / 2014
Transaction ID : 4236028
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 97.00
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 445 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Robin I. Eisenberg		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4244745
Mailing Address 8226 Brookside Road		Amount of Each Receipt this Period 25.00
City Elkins Park	State PA	Zip Code 19027
FEC ID number of contributing federal political committee.	C	
Name of Employer Manager, Learning And Development	Occupation Pearson Vue	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Ms. Eleanor S. Eisenberg		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4229871
Mailing Address 20 Continental Avenue Apt. 1S		Amount of Each Receipt this Period 5.00
City Forest Hills	State NY	Zip Code 11375
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 ▼ 595.00	

Full Name (Last, First, Middle Initial) C. Ms. Eleanor S. Eisenberg		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2014 Transaction ID : 4239077
Mailing Address 20 Continental Avenue Apt. 1S		Amount of Each Receipt this Period 5.00
City Forest Hills	State NY	Zip Code 11375
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 ▼ 595.00	

SUBTOTAL of Receipts This Page (optional).....▶	35.00
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 446 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Eleanor S. Eisenberg		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2014 Transaction ID : 4229631
Mailing Address 20 Continental Avenue Apt. 1S		Amount of Each Receipt this Period 100.00
City Forest Hills	State NY	
Zip Code 11375		Aggregate Year-to-Date ▼ 595.00
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 ▼ 595.00		

Full Name (Last, First, Middle Initial) B. Ms. Eleanor S. Eisenberg		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241702
Mailing Address 20 Continental Avenue Apt. 1S		Amount of Each Receipt this Period 100.00
City Forest Hills	State NY	
Zip Code 11375		Aggregate Year-to-Date ▼ 595.00
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 ▼ 595.00		

Full Name (Last, First, Middle Initial) C. Ms. Dorothy Eisenberg		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4233842
Mailing Address 2261 Summerwind Circle		Amount of Each Receipt this Period 100.00
City Henderson	State NV	
Zip Code 89052		Aggregate Year-to-Date ▼ 400.00
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Housewife	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 447 OF 2648
	<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)
EMILY's List

A. Dr. Monika Eisenbud
Full Name (Last, First, Middle Initial)

Mailing Address 2 Ajax Place

City Berkeley State CA Zip Code 94708

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

Name of Employer None Occupation None

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
 12 / 17 / 2014

Transaction ID : 4237936

Amount of Each Receipt this Period
 100.00

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

Mailing Address 3 Rocky Hollow Drive

City Larchmont State NY Zip Code 10538

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

Name of Employer Self Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4228705

Amount of Each Receipt this Period
 50.00

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

Mailing Address 3 Rocky Hollow Drive

City Larchmont State NY Zip Code 10538

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

Name of Employer Self Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4242010

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 448 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Judy Eisfelder		Date of Receipt
Mailing Address 5630 Fairway Rd.		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Fairway	KS	66205
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="410.00"/>	
Amount of Each Receipt this Period		<input type="text" value="30.00"/>
Transaction ID : 4228706		

Full Name (Last, First, Middle Initial) B. Judy Eisfelder		Date of Receipt
Mailing Address 5630 Fairway Rd.		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Fairway	KS	66205
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="410.00"/>	
Amount of Each Receipt this Period		<input type="text" value="30.00"/>
Transaction ID : 4241434		

Full Name (Last, First, Middle Initial) C. Mrs. Deborah B. Eitelberg		Date of Receipt
Mailing Address 12965 Paseo Barranco		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Salinas	CA	93908
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Defense Manpower Data Center	Mgmt. Analyst	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	
Amount of Each Receipt this Period		<input type="text" value="75.00"/>
Transaction ID : 4240353		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="135.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 449 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Andrea J. Elberger
 Full Name (Last, First, Middle Initial)
 Mailing Address 232 S Yates Rd.
 City Memphis State TN Zip Code 38120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Tennessee Health Science Occupation Professor
 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
 12 / 20 / 2014
Transaction ID : 4239083
 Amount of Each Receipt this Period
 100.00

B. Kimberly Elder
 Full Name (Last, First, Middle Initial)
 Mailing Address 599 Old Albee Farm Rd.
 City Nokomis State FL Zip Code 34275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Island Village Montessori School Occupation Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238521
 Amount of Each Receipt this Period
 25.00

C. Kimberly Elder
 Full Name (Last, First, Middle Initial)
 Mailing Address 599 Old Albee Farm Rd.
 City Nokomis State FL Zip Code 34275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Island Village Montessori School Occupation Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228707
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 450 OF 2648
	<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)
EMILY's List

A. Kimberly Elder
Full Name (Last, First, Middle Initial)

Mailing Address 599 Old Albee Farm Rd.

City Nokomis State FL Zip Code 34275

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

Name of Employer Island Village Montessori School Occupation Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **775.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241209

Amount of Each Receipt this Period
50.00

B. Ms. Marjorie L Elder
Full Name (Last, First, Middle Initial)

Mailing Address 1181 Cork Rd

City Victor State NY Zip Code 14564

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

Name of Employer None Occupation Na

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236733

Amount of Each Receipt this Period
75.00

C. Mr. James Elder
Full Name (Last, First, Middle Initial)

Mailing Address 299 Ashlar Drive

City Napa State CA Zip Code 94558

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232691

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **145.00**

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 451 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan K. Eleuterio		Date of Receipt
Mailing Address 3646 Ridge Road		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Highland	State IN	Zip Code 46322
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4228708
Name of Employer Self	Occupation Folklorist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Susan K. Eleuterio		Date of Receipt
Mailing Address 3646 Ridge Road		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Highland	State IN	Zip Code 46322
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4242011
Name of Employer Self	Occupation Folklorist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Bernice B. Elkin		Date of Receipt
Mailing Address 1055 N Kingsley Dr Lh513		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City Los Angeles	State CA	Zip Code 90029
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4243092
Name of Employer None	Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
	<input type="text" value="1525.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 452 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Bernice B. Elkin		Date of Receipt 12 / 29 / 2014 Transaction ID : 4242439
Mailing Address 1055 N Kingsley Dr Lh513		Amount of Each Receipt this Period 100.00
City Los Angeles	State CA	
Zip Code 90029		Aggregate Year-to-Date ▼ 1525.00
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) ▼

Full Name (Last, First, Middle Initial) B. Ms. Bernice B. Elkin		Date of Receipt 12 / 31 / 2014 Transaction ID : 4243093
Mailing Address 1055 N Kingsley Dr Lh513		Amount of Each Receipt this Period 100.00
City Los Angeles	State CA	
Zip Code 90029		Aggregate Year-to-Date ▼ 1525.00
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) ▼

Full Name (Last, First, Middle Initial) C. Ms. Angela Elkins		Date of Receipt 12 / 31 / 2014 Transaction ID : 4243163
Mailing Address 1963 Biltmore St NW		Amount of Each Receipt this Period 75.00
City Washington	State DC	
Zip Code 20009		Aggregate Year-to-Date ▼ 275.00
FEC ID number of contributing federal political committee. C		
Name of Employer U Of Maryland Ssw	Occupation Social Work Educator	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	275.00
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 453 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Corinne Ellingham		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014
Mailing Address 9371 Nesbitt Rd		Transaction ID : 4239682
City Bloomington	State MN	Zip Code 55437
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Denise F. Ellinwood		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014
Mailing Address 46-074 Puulena St		Transaction ID : 4235722
City Kaneohe	State HI	Zip Code 96744
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer None	Occupation Domestic Goddess	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) C. Ms. Margaret Elliot		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2014
Mailing Address 17745 Elmhurst Cir		Transaction ID : 4242526
City Yorba Linda	State CA	Zip Code 92886
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 113.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 891.00	

SUBTOTAL of Receipts This Page (optional).....▶	238.00
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 454 OF 2648
	<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)
EMILY's List

A. Noel Elliott
Full Name (Last, First, Middle Initial)
Mailing Address 13505 Collingwood Ter
City Silver Spring State MD Zip Code 20904
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 ▼ 240.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233693
Amount of Each Receipt this Period
20.00

B. Mr. Donald Ellison
Full Name (Last, First, Middle Initial)
Mailing Address 2715 35th Ave.
City San Francisco State CA Zip Code 94116
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Tax Preparer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 12 / 2014
Transaction ID : 4235177
Amount of Each Receipt this Period
150.00

C. Ms. Kate Elsley
Full Name (Last, First, Middle Initial)
Mailing Address 1415 Elm St
City San Carlos State CA Zip Code 94070
FEC ID number of contributing federal political committee. **C**
Name of Employer San Mateo County Occupation Nurse Practitioner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 264.00

Date of Receipt
11 / 25 / 2014
Transaction ID : 4229788
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 195.00
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 455 OF 2648
	<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)
EMILY's List

A. Ms. Kate Elsley
Full Name (Last, First, Middle Initial)
Mailing Address 1415 Elm St
City San Carlos State CA Zip Code 94070
FEC ID number of contributing federal political committee. **C**
Name of Employer San Mateo County Occupation Nurse Practitioner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 264.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239809
Amount of Each Receipt this Period 25.00

B. Ms. Mary Elston
Full Name (Last, First, Middle Initial)
Mailing Address 13910 Portnell Red
City Bozeman State MT Zip Code 59718
FEC ID number of contributing federal political committee. **C**
Name of Employer Bcc Associates, Inc. Occupation Computer Programmer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231968
Amount of Each Receipt this Period 40.00

C. Ms. Patricia S. Elvebak
Full Name (Last, First, Middle Initial)
Mailing Address 650 Oakdale Ave.
City Corte Madera State CA Zip Code 94925
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 ▼ 655.00

Date of Receipt
12 / 29 / 2014
Transaction ID : 4242453
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 315.00
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 456 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Antoinette S. Emch		Date of Receipt 12 / 03 / 2014 Transaction ID : 4231615
Mailing Address 621 NE 5th Ter		Amount of Each Receipt this Period 25.00
City Gainesville	State FL	Zip Code 32601
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Historian	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Dr. Sharon H. Emek		Date of Receipt 12 / 29 / 2014 Transaction ID : 4242648
Mailing Address 75 East End Ave Apt. 16g		Amount of Each Receipt this Period 1200.00
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee. C		
Name of Employer Work At Home Vintage Employees Llc	Occupation Ceo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3700.00	

Full Name (Last, First, Middle Initial) C. Mr. Ralph W. Emerson		Date of Receipt 12 / 18 / 2014 Transaction ID : 4238166
Mailing Address 150 Gibbons Way		Amount of Each Receipt this Period 20.00
City Athens	State GA	Zip Code 30605
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

SUBTOTAL of Receipts This Page (optional).....▶	1245.00
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 457 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Joan Emery

Mailing Address 1434 Josephine Street

City Berkeley	State CA	Zip Code 94703
------------------	-------------	-------------------

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

Name of Employer Integrated Genetics	Occupation Genetic Counselor
---	---------------------------------

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
12	/	28	/	2014

Transaction ID : 4241321

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Ms. Elaine Emling

Mailing Address 8901 Sudbury Road

City Silver Spring	State MD	Zip Code 20901
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
908.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4231523

Amount of Each Receipt this Period
53.00

Full Name (Last, First, Middle Initial)
C. Ms. Susan Emerson

Mailing Address 1303 E. Washington St.

City Bloomington	State IL	Zip Code 61701
---------------------	-------------	-------------------

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

Name of Employer None	Occupation Artist
--------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4239810

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	453.00
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 458 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Lucinda B. Emmet
 Full Name (Last, First, Middle Initial)
 Mailing Address 1020 Southard St
 City Key West State FL Zip Code 33040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236565
 Amount of Each Receipt this Period
 250.00

B. Sharon Neuffer Emswiler
 Full Name (Last, First, Middle Initial)
 Mailing Address 4402 Doverbrook Dr
 City Champaign State IL Zip Code 61822
 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 ▼ 300.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4232098
 Amount of Each Receipt this Period
 20.00

C. Sharon Neuffer Emswiler
 Full Name (Last, First, Middle Initial)
 Mailing Address 4402 Doverbrook Dr
 City Champaign State IL Zip Code 61822
 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 ▼ 300.00

Date of Receipt
 12 / 14 / 2014
Transaction ID : 4235453
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	290.00
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 459 OF 2648
	<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)
EMILY's List

A. Irene Engard
Full Name (Last, First, Middle Initial)
Mailing Address 931 Presidio Dr
City Costa Mesa State CA Zip Code 92626
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2014
Transaction ID : 4236109
Amount of Each Receipt this Period
15.00

B. Richard Engel
Full Name (Last, First, Middle Initial)
Mailing Address 27200 Cedar Rd. Apt 521
City Beachwood State OH Zip Code 44122
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 ▼ 282.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4229890
Amount of Each Receipt this Period
8.00

C. Richard Engel
Full Name (Last, First, Middle Initial)
Mailing Address 27200 Cedar Rd. Apt 521
City Beachwood State OH Zip Code 44122
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 ▼ 282.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240414
Amount of Each Receipt this Period
8.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 31.00
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 460 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Ilene Engel

Mailing Address 1057 Arbor Trce NE

City Atlanta State GA Zip Code 30319

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
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4230995

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Mr. Hans Engelke

Mailing Address 640 Weaver Ave.

City Kalamazoo State MI Zip Code 49006

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
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227703

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. Ms. Dorothy Engelman

Mailing Address 875 Rio Virgin Dr.
Unit 207

City St. George State UT Zip Code 84790

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

Name of Employer Rocky Mountain Hospice Occupation Volunteer Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228710

Amount of Each Receipt this Period
7.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 407.00

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 461 OF 2648
	<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	

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)
EMILY's List

A. Ms. Dorothy Engelman
Full Name (Last, First, Middle Initial)

Mailing Address 875 Rio Virgin Dr.
Unit 207

City St. George State UT Zip Code 84790

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

Name of Employer Rocky Mountain Hospice Occupation Volunteer Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.50

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014

Transaction ID : 4241831

Amount of Each Receipt this Period
7.00

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

Mailing Address 875 Rio Virgin Dr.
Unit 207

City St. George State UT Zip Code 84790

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

Name of Employer Rocky Mountain Hospice Occupation Volunteer Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.50

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2014

Transaction ID : 4228284

Amount of Each Receipt this Period
10.00

C. Ms. Dorothy Engelman
Full Name (Last, First, Middle Initial)

Mailing Address 875 Rio Virgin Dr.
Unit 207

City St. George State UT Zip Code 84790

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

Name of Employer Rocky Mountain Hospice Occupation Volunteer Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.50

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2014

Transaction ID : 4241075

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	27.00
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 462 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carolyn Tomazic Engers		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227701
Mailing Address 1620 Black Rd.		Amount of Each Receipt this Period 225.00
City Joliet	State IL	Zip Code 60435
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 ▼ 775.00	

Full Name (Last, First, Middle Initial) B. Ms. Phyllis Tattershall England		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237155
Mailing Address 5309 Idlewild Road		Amount of Each Receipt this Period 15.00
City Burlington	State KY	Zip Code 41005
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) C. Ms. Phyllis Tattershall England		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 18 / 2014 Transaction ID : 4238100
Mailing Address 5309 Idlewild Road		Amount of Each Receipt this Period 15.00
City Burlington	State KY	Zip Code 41005
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

SUBTOTAL of Receipts This Page (optional).....▶	255.00
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 463 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Randall Engle			Date of Receipt
Mailing Address 1103 Bromley Road			<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4227887
Avondale Estates	GA	30002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="35.00"/>
Name of Employer	Occupation		
Georgia Tech	Professor		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="245.00"/>		

Full Name (Last, First, Middle Initial) B. Cynthia Englert			Date of Receipt
Mailing Address 744 E 9th			<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4236029
Houston	TX	77007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Houston Community College	Accountant		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="420.00"/>		

Full Name (Last, First, Middle Initial) C. Cynthia Englert			Date of Receipt
Mailing Address 744 E 9th			<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4239811
Houston	TX	77007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Houston Community College	Accountant		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="420.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 464 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Pamela Englett		Date of Receipt 12 / 31 / 2014 Transaction ID : 4243145
Mailing Address 1359 Olivia Court Suite 1225		Amount of Each Receipt this Period 25.00
City Bellingham	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00
Name of Employer Self	Occupation Family Law Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. Pamela Englett		Date of Receipt 12 / 02 / 2014 Transaction ID : 4231317
Mailing Address 1359 Olivia Court Suite 1225		Amount of Each Receipt this Period 100.00
City Bellingham	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00
Name of Employer Self	Occupation Family Law Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C. Joan Enloe		Date of Receipt 12 / 19 / 2014 Transaction ID : 4238525
Mailing Address 1451 Yellowstone		Amount of Each Receipt this Period 10.00
City Medford	State OR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 220.00
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 ▼	

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 466 OF 2648
	<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)
EMILY's List

A. Ms. Judith B. Ennes
Full Name (Last, First, Middle Initial)
Mailing Address 570 45th Street

City Brooklyn	State NY	Zip Code 11220
------------------	-------------	-------------------

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

Name of Employer None	Occupation Educator
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4239813

Amount of Each Receipt this Period

90.00

B. Ms. Mari Kae Ennis-Applegate
Full Name (Last, First, Middle Initial)
Mailing Address 18221 Quailridge Rd.

City Cottonwood	State CA	Zip Code 96022
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228712

Amount of Each Receipt this Period

20.00

C. Ms. Mari Kae Ennis-Applegate
Full Name (Last, First, Middle Initial)
Mailing Address 18221 Quailridge Rd.

City Cottonwood	State CA	Zip Code 96022
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241435

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 467 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Judith Enright		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239814
Mailing Address 12 Mimbres Ct		Amount of Each Receipt this Period 25.00
City Placitas	State NM	Zip Code 87043
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Health Care Consultant-Rn	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Walter G. Ensign		Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230411
Mailing Address 715 Ashland St		Amount of Each Receipt this Period 200.00
City Ashland	State OR	Zip Code 97520
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 ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Ms. Janice L. Ensley		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239815
Mailing Address PO Box 603		Amount of Each Receipt this Period 25.00
City Beavercreek	State OR	Zip Code 97004
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 ▼ 310.00	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 468 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Julie Epstein		Date of Receipt 12 / 10 / 2014 Transaction ID : 4234548
Mailing Address 6672 nw 23rd terrace		Amount of Each Receipt this Period 50.00
City Boca Raton	State FL	Zip Code 33496
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation None		Aggregate Year-to-Date ▼ 880.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Julie Epstein		Date of Receipt 12 / 10 / 2014 Transaction ID : 4234549
Mailing Address 6672 nw 23rd terrace		Amount of Each Receipt this Period 50.00
City Boca Raton	State FL	Zip Code 33496
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation None		Aggregate Year-to-Date ▼ 880.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Julie Epstein		Date of Receipt 12 / 18 / 2014 Transaction ID : 4238151
Mailing Address 6672 nw 23rd terrace		Amount of Each Receipt this Period 50.00
City Boca Raton	State FL	Zip Code 33496
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation None		Aggregate Year-to-Date ▼ 880.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 469 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Andrew Erdman		Date of Receipt 12 / 30 / 2014 Transaction ID : 4243001
Mailing Address 100 Main Street		Amount of Each Receipt this Period 35.00
City Stockton	State CA	Zip Code 95201
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 245.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Janet Erickson		Date of Receipt 11 / 25 / 2014 Transaction ID : 4230169
Mailing Address 63356 Nels Anderson Rd Ste 11		Amount of Each Receipt this Period 50.00
City Bend	State OR	Zip Code 97701
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 600.00
Name of Employer Jerry's Custom Cycle	Occupation Small Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Janet Erickson		Date of Receipt 12 / 26 / 2014 Transaction ID : 4240834
Mailing Address 63356 Nels Anderson Rd Ste 11		Amount of Each Receipt this Period 50.00
City Bend	State OR	Zip Code 97701
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 600.00
Name of Employer Jerry's Custom Cycle	Occupation Small Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 470 OF 2648
	<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)
EMILY's List

A. Mr. Erick Erickson
Full Name (Last, First, Middle Initial)

Mailing Address 325 Kempton St Apt 809

City Spring Valley	State CA	Zip Code 91977
-----------------------	-------------	-------------------

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 ▼
610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	17	/	2014

Transaction ID : 4237534

Amount of Each Receipt this Period

85.00

B. Mr. Erick Erickson
Full Name (Last, First, Middle Initial)

Mailing Address 325 Kempton St Apt 809

City Spring Valley	State CA	Zip Code 91977
-----------------------	-------------	-------------------

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 ▼
610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230412

Amount of Each Receipt this Period

30.00

C. Ms. Carol Erion
Full Name (Last, First, Middle Initial)

Mailing Address 19 West Linden Street

City Alexandria	State VA	Zip Code 22301
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	17	/	2014

Transaction ID : 4237809

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 471 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patt Erisman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3650 Chicora Ct., Apt. 317
 City Fort Worth State TX Zip Code 76116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233060
 Amount of Each Receipt this Period
 150.00

B. Ms. Sue Errington
 Full Name (Last, First, Middle Initial)
 Mailing Address 3200 West Brook Drive
 City Muncie State IN Zip Code 47304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Of Indiana Occupation Legislator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4242972
 Amount of Each Receipt this Period
 35.00

C. Ms. Sue Errington
 Full Name (Last, First, Middle Initial)
 Mailing Address 3200 West Brook Drive
 City Muncie State IN Zip Code 47304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Of Indiana Occupation Legislator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237793
 Amount of Each Receipt this Period
 85.00

SUBTOTAL of Receipts This Page (optional).....▶	270.00
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 472 OF 2648
	(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)
EMILY's List

A. Joan Erskine
Full Name (Last, First, Middle Initial)

Mailing Address 50 Lefferts Ave. 5a

City Brooklyn State NY Zip Code 11225

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

Name of Employer Kings County District Attorney's Office Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4231847

Amount of Each Receipt this Period 15.00

B. Ms. Carole Erwin
Full Name (Last, First, Middle Initial)

Mailing Address 25385 State Highway 251

City Hudson State IL Zip Code 61748

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 ▼ 300.00

Date of Receipt 12 / 08 / 2014
Transaction ID : 4233743

Amount of Each Receipt this Period 150.00

C. Ms. Alberta Espie
Full Name (Last, First, Middle Initial)

Mailing Address 5821 Dickson Road

City Jacksonville State FL Zip Code 32211

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 ▼ 660.00

Date of Receipt 12 / 18 / 2014
Transaction ID : 4238200

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 215.00

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 473 OF 2648
	<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)
EMILY's List

A. Ms. Pamela J. Esser
 Full Name (Last, First, Middle Initial)
 Mailing Address 5215 Wayfind Ln
 City Bloomfield State MI Zip Code 48302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243468
 Amount of Each Receipt this Period
 30.00

B. Aaron Essif
 Full Name (Last, First, Middle Initial)
 Mailing Address 12500 N Tare Lane
 City Marana State AZ Zip Code 85653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St Marys Hospital, Tucson, Az 85745 Occupation Admin. Supervisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228714
 Amount of Each Receipt this Period
 30.00

C. Aaron Essif
 Full Name (Last, First, Middle Initial)
 Mailing Address 12500 N Tare Lane
 City Marana State AZ Zip Code 85653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St Marys Hospital, Tucson, Az 85745 Occupation Admin. Supervisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242013
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 474 OF 2648
	<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)
EMILY's List

A. Ms. Sandra Estes
Full Name (Last, First, Middle Initial)

Mailing Address 5315 South Dentwood Drive

City Dallas State TX Zip Code 75220

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
12 / 12 / 2014
Transaction ID : 4235318

Amount of Each Receipt this Period
300.00

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

Mailing Address 3635 STIMPSON DR

City Pfafftown State NC Zip Code 27040

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238530

Amount of Each Receipt this Period
15.00

C. Mrs. Vivian M. Ettinger
Full Name (Last, First, Middle Initial)

Mailing Address 156 Lombard Street No. 13

City San Francisco State CA Zip Code 94111

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 ▼ **300.00**

Date of Receipt
12 / 17 / 2014
Transaction ID : 4238013

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... **415.00**

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 475 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Nancy Johnson Evans
 Full Name (Last, First, Middle Initial)
 Mailing Address 1508 E. El Alameda
 City State Zip Code
 Palm Springs CA 92262
 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 ▼
 470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4244766
 Amount of Each Receipt this Period
 25.00

B. Ms. Nancy Johnson Evans
 Full Name (Last, First, Middle Initial)
 Mailing Address 1508 E. El Alameda
 City State Zip Code
 Palm Springs CA 92262
 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 ▼
 470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234216
 Amount of Each Receipt this Period
 40.00

C. Jo-An Evans
 Full Name (Last, First, Middle Initial)
 Mailing Address 7000 Island Blvd., Unit 2002
 City State Zip Code
 Aventura FL 33160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230996
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 265.00
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 476 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Margaret T. Evans		Date of Receipt 12 / 19 / 2014 Transaction ID : 4238531
Mailing Address 111 Fourth Avenue		Amount of Each Receipt this Period 25.00
City New York	State NY	Zip Code 10003
FEC ID number of contributing federal political committee. C		
Name of Employer Suny	Occupation College Educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 890.00	

Full Name (Last, First, Middle Initial) B. Margaret T. Evans		Date of Receipt 11 / 28 / 2014 Transaction ID : 4228715
Mailing Address 111 Fourth Avenue		Amount of Each Receipt this Period 50.00
City New York	State NY	Zip Code 10003
FEC ID number of contributing federal political committee. C		
Name of Employer Suny	Occupation College Educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 890.00	

Full Name (Last, First, Middle Initial) C. Margaret T. Evans		Date of Receipt 12 / 28 / 2014 Transaction ID : 4241262
Mailing Address 111 Fourth Avenue		Amount of Each Receipt this Period 50.00
City New York	State NY	Zip Code 10003
FEC ID number of contributing federal political committee. C		
Name of Employer Suny	Occupation College Educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 890.00	

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 477 OF 2648
	<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)
EMILY's List

A. Ms. Myrtle A. Everett
Full Name (Last, First, Middle Initial)

Mailing Address 7015 Harbor Place Drive

City Saint Clair Shores State MI Zip Code 48080

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 ▼ 400.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4232956

Amount of Each Receipt this Period
200.00

B. Meredith Ewer Ewer-Speck
Full Name (Last, First, Middle Initial)

Mailing Address 2351 Champlain St. N.W., Unit C

City Washington State DC Zip Code 20009

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

Name of Employer Symbion Power Occupation Business Development Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4240144

Amount of Each Receipt this Period
15.00

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

Mailing Address 8625 Rolling Hills Road

City Custer State WI Zip Code 54423

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 ▼ 550.00

Date of Receipt
11 / 28 / 2014
Transaction ID : 4228717

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	265.00
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 478 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Donald Fadner
 Full Name (Last, First, Middle Initial)
 Mailing Address 8625 Rolling Hills Road
 City Custer State WI Zip Code 54423
 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 **550.00**

Date of Receipt
 12 / 28 / 2014
Transaction ID : 4242016
 Amount of Each Receipt this Period
50.00

B. Mr. Michael N. Fairchild
 Full Name (Last, First, Middle Initial)
 Mailing Address 433 Solano Drive NE
 City Albuquerque State NM Zip Code 87108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of New Mexico Occupation Research Engineer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **275.00**

Date of Receipt
 12 / 27 / 2014
Transaction ID : 4241036
 Amount of Each Receipt this Period
75.00

C. Ms. Diane G. Faissler
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Darby Lane
 City Rockport State MA Zip Code 01966
 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 **1000.00**

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236574
 Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... **375.00**
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 479 OF 2648
	<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)
EMILY's List

A. Linda Falcon
Full Name (Last, First, Middle Initial)

Mailing Address 2304 N Cirby Way

City Roseville State CA Zip Code 95661

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4228719

Amount of Each Receipt this Period
 20.00

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

Mailing Address 2304 N Cirby Way

City Roseville State CA Zip Code 95661

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4242017

Amount of Each Receipt this Period
 20.00

C. Ms. Jennifer IL. Fallon
Full Name (Last, First, Middle Initial)

Mailing Address 203 Stratford, # 2

City Houston State TX Zip Code 77006

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

Name of Employer Baylor College of Medicine Occupation lab tech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014

Transaction ID : 4234145

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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 480 OF 2648
	<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)
EMILY's List

A. Ms. Diane Farage
Full Name (Last, First, Middle Initial)
Mailing Address 2541 Oakwood Dr. S.E.
City Grand Rapids State MI Zip Code 49506
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239623
Amount of Each Receipt this Period
100.00

B. Ms. Harriett Farnoli
Full Name (Last, First, Middle Initial)
Mailing Address 26 Varcik Court
City Rockville Centre State NY Zip Code 11570
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231986
Amount of Each Receipt this Period
20.00

C. Ms. Peggie Fariss
Full Name (Last, First, Middle Initial)
Mailing Address 418 Heliotrope Ave
City Corona Del Mar State CA Zip Code 92625
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Walt Disney Imagineering Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
11 / 28 / 2014
Transaction ID : 4228722
Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 195.00
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 481 OF 2648
	<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)
EMILY's List

A. Ms. Peggie Fariss
Full Name (Last, First, Middle Initial)
Mailing Address 418 Heliotrope Ave
City Corona Del Mar State CA Zip Code 92625
FEC ID number of contributing federal political committee. **C**
Name of Employer Walt Disney Imagineering Occupation Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241372
Amount of Each Receipt this Period
75.00

B. Mary Frances Farkas
Full Name (Last, First, Middle Initial)
Mailing Address 831 Audubon Rd.
City East Lansing State MI Zip Code 48823
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 ▼ 423.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228723
Amount of Each Receipt this Period
25.00

C. Mary Frances Farkas
Full Name (Last, First, Middle Initial)
Mailing Address 831 Audubon Rd.
City East Lansing State MI Zip Code 48823
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 ▼ 423.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4242019
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 482 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Angela Farkas-Ratkowski		Date of Receipt
Mailing Address PO Box 388		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Northborough	MA	01532
FEC ID number of contributing federal political committee.		Transaction ID : 4227892
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2500"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="510.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Angela Farkas-Ratkowski		Date of Receipt
Mailing Address PO Box 388		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Northborough	MA	01532
FEC ID number of contributing federal political committee.		Transaction ID : 4240764
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2500"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="510.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Michele U. Farley		Date of Receipt
Mailing Address 19 Harwich Ln		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
West Hartford	CT	06117
FEC ID number of contributing federal political committee.		Transaction ID : 4235538
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="3500"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="85.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 483 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Cheryl C. Farmer
 Full Name (Last, First, Middle Initial)
 Mailing Address 214 North Huronst
 City Ypsilanti State MI Zip Code 48197
 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 ▼ 360.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236893
 Amount of Each Receipt this Period
 35.00

B. Stephen Farr
 Full Name (Last, First, Middle Initial)
 Mailing Address 4004 Sherwood Terrace
 City Sioux City State IA Zip Code 51106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fimco, Inc. Occupation Assembler
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 12 / 26 / 2014
Transaction ID : 4240566
 Amount of Each Receipt this Period
 10.00

C. Stephen Farr
 Full Name (Last, First, Middle Initial)
 Mailing Address 4004 Sherwood Terrace
 City Sioux City State IA Zip Code 51106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fimco, Inc. Occupation Assembler
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 12 / 13 / 2014
Transaction ID : 4236256
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 484 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. James Farrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 San Rafael Ave
 City Belvedere State CA Zip Code 94920
 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 ▼ 930.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236946
 Amount of Each Receipt this Period
 15.00

B. James Farrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 San Rafael Ave
 City Belvedere State CA Zip Code 94920
 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 ▼ 930.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235481
 Amount of Each Receipt this Period
 35.00

C. James Farrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 San Rafael Ave
 City Belvedere State CA Zip Code 94920
 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 ▼ 930.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236725
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 485 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Diana Farris		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239819
Mailing Address 501 Melody Lane South		Amount of Each Receipt this Period 25.00
City Socorro	State NM	Zip Code 87801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
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 ▼	

Full Name (Last, First, Middle Initial) B. Ms. Katherine Farris		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4244852
Mailing Address 811 E Salem Ave		Amount of Each Receipt this Period 85.00
City Indianola	State IA	Zip Code 50125
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1020.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C. Mrs. Susan E. Farstrup		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2014 Transaction ID : 4239300
Mailing Address 4635 Gaeta Dr.		Amount of Each Receipt this Period 50.00
City Venice	State FL	Zip Code 34293
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	160.00
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 486 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Sarah Gerek Fassett
 Full Name (Last, First, Middle Initial)
 Mailing Address 552 Los Nidos Drive
 City Santa Fe State NM Zip Code 87501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Bookseller
 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
 12 / 31 / 2014
Transaction ID : 4243509
 Amount of Each Receipt this Period
 50.00

B. Ms. Marilyn Faucett
 Full Name (Last, First, Middle Initial)
 Mailing Address 2814 S. Kinnickinnic Ave.
 City Milwaukee State WI Zip Code 53207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 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
 11 / 26 / 2014
Transaction ID : 4227724
 Amount of Each Receipt this Period
 10.00

C. Ms. Nancy A. Faulkender
 Full Name (Last, First, Middle Initial)
 Mailing Address 7494 Bobbie Way
 City Rohnert Park State CA Zip Code 94928
 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 ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228726
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 487 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy A. Faulkender		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241439
Mailing Address 7494 Bobbie Way		Amount of Each Receipt this Period 50.00
City Rohnert Park	State CA	Zip Code 94928
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 550.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. Prof. Jacqueline J Faulkner		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230094
Mailing Address 363 Marich Way		Amount of Each Receipt this Period 25.00
City Los Altos	State CA	Zip Code 94022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 325.00
Name of Employer Attorney	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C. Prof. Jacqueline J Faulkner		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239820
Mailing Address 363 Marich Way		Amount of Each Receipt this Period 25.00
City Los Altos	State CA	Zip Code 94022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 325.00
Name of Employer Attorney	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 488 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Barbara Faulkner

Mailing Address 340 Old Mill Rd. Spc. 122

City	State	Zip Code
Santa Barbara	CA	93110

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

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240874

Amount of Each Receipt this Period

50.00

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

Mailing Address 340 Old Mill Rd. Spc. 122

City	State	Zip Code
Santa Barbara	CA	93110

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

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2014

Transaction ID : 4227694

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)
C. Mrs. Arthur A. Feder

Mailing Address 25 West 81 Street

City	State	Zip Code
New York	NY	10024

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

Name of Employer	Occupation
None	Retired

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
11	/	25	/	2014

Transaction ID : 4227463

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 489 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Myra L. Feffer, M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2464 Angelo Drive
 City Los Angeles State CA Zip Code 90077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VA Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **205.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239825
 Amount of Each Receipt this Period
15.00

B. Ellen Feibleman
 Full Name (Last, First, Middle Initial)
 Mailing Address 552 Stagecoach Way SE
 City Salem State OR Zip Code 97302
 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 **410.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232460
 Amount of Each Receipt this Period
100.00

C. Mrs. Betty Feinberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 7919 S. Galileo Lane
 City Tucson State AZ Zip Code 85747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **615.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 29 / 2014
Transaction ID : 4229514
 Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	165.00
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 490 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Ellen Feingold
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 St. Paul St. Apt. 110
 City Brookline State MA Zip Code 02446
 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 ▼ 505.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235758
 Amount of Each Receipt this Period
 20.00

B. Ms. Kathryn Feinmann
 Full Name (Last, First, Middle Initial)
 Mailing Address 89 Oakland Ave
 City Arlington State MA Zip Code 02476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233056
 Amount of Each Receipt this Period
 113.00

C. Ms. Roberta Feinstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 Claymore Blvd.
 City Cleveland State OH Zip Code 44143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230418
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	158.00
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 491 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Roslyn Feldberg		Date of Receipt
Mailing Address 85 Waban Hill Rd N		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Chestnut Hill	State MA	Zip Code 02467
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4228728
Name of Employer None	Occupation None	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
	<input type="text" value="485.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Roslyn Feldberg		Date of Receipt
Mailing Address 85 Waban Hill Rd N		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Chestnut Hill	State MA	Zip Code 02467
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4241440
Name of Employer None	Occupation None	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
	<input type="text" value="485.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Patricia Felder		Date of Receipt
Mailing Address 3720 Egret Dunes Dr		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City Ormond Beach	State FL	Zip Code 32176
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4230419
Name of Employer None	Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
	<input type="text" value="335.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 492 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. James Feldman
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Linda Lane
 City State Zip Code
 Newton MA 02461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236542
 Amount of Each Receipt this Period
 300.00

B. Ms. Maggie Feldman
 Full Name (Last, First, Middle Initial)
 Mailing Address 4393 Kensington Park Way
 City State Zip Code
 Wellington FL 33449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231571
 Amount of Each Receipt this Period
 15.00

C. Ms. Jane Fellner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1234 19TH Ave E
 City State Zip Code
 Seattle WA 98112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 U Of Wa Md
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4231001
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional).....▶	615.00
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 493 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elizabeth T. Fellows		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232612
Mailing Address 8465 Barton Road		Amount of Each Receipt this Period 680.00
City Granite Bay	State CA	Zip Code 95746
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00	

Full Name (Last, First, Middle Initial) B. Ms. Judith Feltman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2014 Transaction ID : 4239190
Mailing Address 5 Marilyn Place		Amount of Each Receipt this Period 220.00
City Clifton	State NJ	Zip Code 07011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
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 ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Ms. Jean A. Felton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232806
Mailing Address 657 Happy Valley Road		Amount of Each Receipt this Period 1375.00
City Pleasanton	State CA	Zip Code 94566
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1375.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 494 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Frances Fenical
 Full Name (Last, First, Middle Initial)
 Mailing Address 1128 Highland Dr.
 City Del Mar State CA Zip Code 92014
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236729
 Amount of Each Receipt this Period
 50.00

B. Joann Fenton
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 Bradford Road
 City Keene State NH Zip Code 03431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234146
 Amount of Each Receipt this Period
 20.00

C. Joann Fenton
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 Bradford Road
 City Keene State NH Zip Code 03431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237185
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 495 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Denise Ferchaud		Date of Receipt
Mailing Address 205 Lakewood Drive		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
West Monroe	LA	71291
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4229820
Name of Employer	Occupation	Amount of Each Receipt this Period
Louisiana School Equipment	Sales	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="365.00"/>	

Full Name (Last, First, Middle Initial) B. Denise Ferchaud		Date of Receipt
Mailing Address 205 Lakewood Drive		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
West Monroe	LA	71291
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4240612
Name of Employer	Occupation	Amount of Each Receipt this Period
Louisiana School Equipment	Sales	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="365.00"/>	

Full Name (Last, First, Middle Initial) C. Denise Ferchaud		Date of Receipt
Mailing Address 205 Lakewood Drive		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
West Monroe	LA	71291
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4232464
Name of Employer	Occupation	Amount of Each Receipt this Period
Louisiana School Equipment	Sales	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="365.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 496 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Vicki Ferguson
 Full Name (Last, First, Middle Initial)
 Mailing Address 7117 Garland Avenue
 City Takoma Park State MD Zip Code 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Anthropologist, Massage Therapist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228730
 Amount of Each Receipt this Period
 5.00

B. Ms. Vicki Ferguson
 Full Name (Last, First, Middle Initial)
 Mailing Address 7117 Garland Avenue
 City Takoma Park State MD Zip Code 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Anthropologist, Massage Therapist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241214
 Amount of Each Receipt this Period
 5.00

C. Ms. Vicki Ferguson
 Full Name (Last, First, Middle Initial)
 Mailing Address 7117 Garland Avenue
 City Takoma Park State MD Zip Code 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Anthropologist, Massage Therapist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4235141
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	20.00
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 497 OF 2648
	<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)
EMILY's List

A. Ann Ferguson
Full Name (Last, First, Middle Initial)
Mailing Address 103 colonade circle
City Naples State FL Zip Code 34103
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 ▼ 225.00

Date of Receipt 12 / 09 / 2014
Transaction ID : 4233954
Amount of Each Receipt this Period 25.00

B. Ms. Elsie Fergusson
Full Name (Last, First, Middle Initial)
Mailing Address 1710 Regent Rd
City Baltimore State MD Zip Code 21209
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation SHOP OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt 12 / 23 / 2014
Transaction ID : 4239827
Amount of Each Receipt this Period 12.00

C. Ms. Denise S. Feriozzi
Full Name (Last, First, Middle Initial)
Mailing Address 1363 E St SE
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C**
Name of Employer Emily's List Occupation Political Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 10 / 2014
Transaction ID : 4234462
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 137.00
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 498 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Norma Fernandez
 Full Name (Last, First, Middle Initial)
 Mailing Address 70-03 252 Street
 City Bellerose State NY Zip Code 11426
 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 ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228731
 Amount of Each Receipt this Period
 50.00

B. Ms. Norma Fernandez
 Full Name (Last, First, Middle Initial)
 Mailing Address 70-03 252 Street
 City Bellerose State NY Zip Code 11426
 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 ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241612
 Amount of Each Receipt this Period
 50.00

C. Mr. Robert Ferral
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 221813
 City Sacramento State CA Zip Code 95822
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233044
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 499 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Pamela Ferrell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228733
Mailing Address 760 10th St.		Amount of Each Receipt this Period 25.00
City Charleston	State IL	Zip Code 61920
FEC ID number of contributing federal political committee. C	Name of Employer Eastern Illinois University	Occupation Librarian
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00	

Full Name (Last, First, Middle Initial) B. Pamela Ferrell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241353
Mailing Address 760 10th St.		Amount of Each Receipt this Period 25.00
City Charleston	State IL	Zip Code 61920
FEC ID number of contributing federal political committee. C	Name of Employer Eastern Illinois University	Occupation Librarian
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00	

Full Name (Last, First, Middle Initial) C. Mr. Vincent A. Ferrero		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227893
Mailing Address 106 Pondview Dr.		Amount of Each Receipt this Period 15.00
City Ludlow	State MA	Zip Code 01056
FEC ID number of contributing federal political committee. C	Name of Employer None	Occupation None
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 500 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Marion Fetics		Date of Receipt
Mailing Address 219 Rose St.		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Metuchen	NJ	08840
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4230422
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="80.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="213.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. Frederick A. Ficken		Date of Receipt
Mailing Address 135 Walnut Hill Rd		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chestnut Hill	MA	02467
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4231762
Name of Employer	Occupation	Amount of Each Receipt this Period
Self	Property Mgr.	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3500.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Barbara Ficyk		Date of Receipt
Mailing Address 21805 Cumberland DR		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Northville	MI	48167
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4231005
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="475.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="380.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 501 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Elisabeth Fidler
 Full Name (Last, First, Middle Initial)
 Mailing Address 4126 Vermont Street
 City San Diego State CA Zip Code 92103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Musician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240928
 Amount of Each Receipt this Period
 500.00

B. Kristina Fielding
 Full Name (Last, First, Middle Initial)
 Mailing Address 4937 Morgan Ave S
 City Minneapolis State MN Zip Code 55419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Real Estate Management
 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
 12 / 31 / 2014
Transaction ID : 4243397
 Amount of Each Receipt this Period
 250.00

C. Ms. June Fields
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 Broad St
 City San Luis Obispo State CA Zip Code 93405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237311
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 785.00
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 502 OF 2648
	(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)
EMILY's List

A. Christine Figueroa
Full Name (Last, First, Middle Initial)

Mailing Address 625 Dania Street

City Palmdale	State CA	Zip Code 93551
------------------	-------------	-------------------

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

Name of Employer Requested	Occupation Educator
-------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	13	/	2014

Transaction ID : 4236257

Amount of Each Receipt this Period

80.00

25.00

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

Mailing Address 4650 Opal Street

City Capitola	State CA	Zip Code 95010
------------------	-------------	-------------------

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

Name of Employer Sccsba	Occupation Executive Director
----------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **595.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	17	/	2014

Transaction ID : 4237805

Amount of Each Receipt this Period

80.00

15.00

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

Mailing Address 4650 Opal Street

City Capitola	State CA	Zip Code 95010
------------------	-------------	-------------------

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

Name of Employer Sccsba	Occupation Executive Director
----------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **595.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	06	/	2014

Transaction ID : 4232550

Amount of Each Receipt this Period

80.00

40.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 503 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jackie Fineberg
Full Name (Last, First, Middle Initial)
Mailing Address 2386 Royal Oaks Dr.
City Alamo State CA Zip Code 94507
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation n/a
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
12 / 01 / 2014
Transaction ID : 4230424
Amount of Each Receipt this Period
150.00

B. Ms. Paula Goodman Finedore
Full Name (Last, First, Middle Initial)
Mailing Address 16302 Dahl Rd
City Laurel State MD Zip Code 20707
FEC ID number of contributing federal political committee. **C**
Name of Employer US Govt Occupation Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4227558
Amount of Each Receipt this Period
50.00

C. Prof. Pamela Fingleton
Full Name (Last, First, Middle Initial)
Mailing Address 168 East 74 Street
City New York State NY Zip Code 10021
FEC ID number of contributing federal political committee. **C**
Name of Employer Lindblad Expeditions Occupation Executive Assistant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2014
Transaction ID : 4232002
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 504 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Elaine Fink

Mailing Address 11 Fellows Ln.

City State Zip Code
Durham NH 03824

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227632

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Ms. Ruth Finkelstein

Mailing Address 4283 George Ave #2

City State Zip Code
San Mateo CA 94403

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239271

Amount of Each Receipt this Period
20.00

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

Mailing Address 612 Victoria Ave Apt A

City State Zip Code
Venice CA 90291

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227895

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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 505 OF 2648
	<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)
EMILY's List

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

Mailing Address 612 Victoria Ave Apt A

City Venice State CA Zip Code 90291

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014

Transaction ID : 4240667

Amount of Each Receipt this Period
 15.00

B. Ms. Elizabeth Finnerty
Full Name (Last, First, Middle Initial)

Mailing Address 4741 Talus Way

City Carmichael State CA Zip Code 95608

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 ▼ 313.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014

Transaction ID : 4232306

Amount of Each Receipt this Period
 100.00

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

Mailing Address 479 del sol ave

City pleasanton State CA Zip Code 94566

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 ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014

Transaction ID : 4232746

Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 506 OF 2648
	<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)
EMILY's List

A. Ms. Nancy F Fiora
Full Name (Last, First, Middle Initial)
Mailing Address 8851 N. Loeffler Lane
City Tucson State AZ Zip Code 85742
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 ▼ 600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2014
Transaction ID : 4233710
Amount of Each Receipt this Period
50.00

B. Mr. Justin Fischer
Full Name (Last, First, Middle Initial)
Mailing Address 6222 Robison Road
City Cincinnati State OH Zip Code 45213
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 ▼ 400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228738
Amount of Each Receipt this Period
35.00

C. Mr. Justin Fischer
Full Name (Last, First, Middle Initial)
Mailing Address 6222 Robison Road
City Cincinnati State OH Zip Code 45213
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 ▼ 400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4242025
Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 507 OF 2648
	<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	

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Susan D. Fischer		Date of Receipt M M / D D / Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233751
Mailing Address 165 W. 66th St. Ph B		Amount of Each Receipt this Period 150.00
City New York	State NY	Zip Code 10023
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	

Full Name (Last, First, Middle Initial) B. Mrs. Sandra Fischer		Date of Receipt M M / D D / Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227454
Mailing Address 300 E 85th St., Apt. 3305		Amount of Each Receipt this Period 100.00
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Sharon Fischtrom		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228739
Mailing Address 1866 Graham Ave		Amount of Each Receipt this Period 25.00
City Saint Paul	State MN	Zip Code 55116
FEC ID number of contributing federal political committee. C		
Name of Employer Regions Hospital	Occupation Registered Nurse	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	275.00
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 508 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Sharon Fischtrom		Date of Receipt 12 / 28 / 2014 Transaction ID : 4241675
Mailing Address 1866 Graham Ave		Amount of Each Receipt this Period 25.00
City Saint Paul	State MN	Zip Code 55116
FEC ID number of contributing federal political committee. C		
Name of Employer Regions Hospital	Occupation Registered Nurse	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Adaire Fisher		Date of Receipt 12 / 19 / 2014 Transaction ID : 4238539
Mailing Address 2116 Fifth Ave		Amount of Each Receipt this Period 50.00
City Fort Worth	State TX	Zip Code 76110
FEC ID number of contributing federal political committee. C		
Name of Employer Fort Worth Independent School District	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Emily H. Fisher		Date of Receipt 12 / 19 / 2014 Transaction ID : 4238538
Mailing Address 517 Kelsey Road		Amount of Each Receipt this Period 1000.00
City Sheffield	State MA	Zip Code 01257
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4200.00	

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
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 509 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Mr. Everett Fisher
 Full Name (Last, First, Middle Initial)
 Mailing Address 45 Lismore Ln.
 City Greenwich State CT Zip Code 06831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 709.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231444
 Amount of Each Receipt this Period
 200.00

B. Ms. Gale Elizabeth Fisk
 Full Name (Last, First, Middle Initial)
 Mailing Address 803 Manchester Ct
 City Claremont State CA Zip Code 91711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Accountant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228740
 Amount of Each Receipt this Period
 20.00

C. Ms. Gale Elizabeth Fisk
 Full Name (Last, First, Middle Initial)
 Mailing Address 803 Manchester Ct
 City Claremont State CA Zip Code 91711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Accountant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241201
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	240.00
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 510 OF 2648
	<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)
EMILY's List

A. Joseph Fisler
Full Name (Last, First, Middle Initial)

Mailing Address 100 Lauriston St # 2

City Providence State RI Zip Code 02906

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 ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014

Transaction ID : 4235433

Amount of Each Receipt this Period
 15.00

B. Mr. Glenn R. Fithian-Barrett
Full Name (Last, First, Middle Initial)

Mailing Address 2834 SE 36th Ave.

City Portland State OR Zip Code 97202

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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4228742

Amount of Each Receipt this Period
 35.00

C. Mr. Glenn R. Fithian-Barrett
Full Name (Last, First, Middle Initial)

Mailing Address 2834 SE 36th Ave.

City Portland State OR Zip Code 97202

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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4241444

Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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 511 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joyce Fitzpatrick		Date of Receipt
Mailing Address 103 Prospect Bay Dr W		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Grasonville	MD	21638
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4231851
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="360.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Barbara Fitzpatrick		Date of Receipt
Mailing Address 9167 Mornington Way		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Lone Tree	CO	80124
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4238541
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Gregory Fitzpatrick		Date of Receipt
Mailing Address 1328 NW 12th Street		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Corvallis	OR	97330
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4236678
Name of Employer	Occupation	Amount of Each Receipt this Period
Self Employed	Ecologist	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="360.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 513 OF 2648
	<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)
EMILY's List

A. Ms. Miriam Flamm
Full Name (Last, First, Middle Initial)

Mailing Address 100 Sunrise Ave., Apt. 607

City Palm Beach	State FL	Zip Code 33480
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	09	/	2014

Transaction ID : 4233837

Amount of Each Receipt this Period
450.00

B. Ms. Charlotte Flanner
Full Name (Last, First, Middle Initial)

Mailing Address 2400 E. Sweet Ave

City Visalia	State CA	Zip Code 93292
-----------------	-------------	-------------------

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 ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	11	/	2014

Transaction ID : 4234903

Amount of Each Receipt this Period
15.00

C. Ms. Charlotte Flanner
Full Name (Last, First, Middle Initial)

Mailing Address 2400 E. Sweet Ave

City Visalia	State CA	Zip Code 93292
-----------------	-------------	-------------------

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 ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228743

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	490.00
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 514 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Charlotte Flanner
 Full Name (Last, First, Middle Initial)
 Mailing Address 2400 E. Sweet Ave
 City Visalia State CA Zip Code 93292
 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 ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241704
 Amount of Each Receipt this Period
 25.00

B. Ms. Trish Flaster
 Full Name (Last, First, Middle Initial)
 Mailing Address 1180 Crestmoor Dr
 City Boulder State CO Zip Code 80303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Ethnobotanist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2014
Transaction ID : 4238072
 Amount of Each Receipt this Period
 25.00

C. Ms. Toby Flax
 Full Name (Last, First, Middle Initial)
 Mailing Address 1925 Gough St.
 City San Francisco State CA Zip Code 94109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Interior Designer
 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
 12 / 23 / 2014
Transaction ID : 4239646
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 515 OF 2648
	<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)
EMILY's List

A. Gail Fleischaker
Full Name (Last, First, Middle Initial)
Mailing Address 62 W Pelham Road
City Shutesbury State MA Zip Code 01072
FEC ID number of contributing federal political committee. **C**
Name of Employer University Of Massachusetts Amherst Occupation Finance & Grants Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt 12 / 10 / 2014
Transaction ID : 4234480
Amount of Each Receipt this Period 10.00

B. Ms. Becky Fleming
Full Name (Last, First, Middle Initial)
Mailing Address 7920 108th Ave NE
City Norman State OK Zip Code 73026
FEC ID number of contributing federal political committee. **C**
Name of Employer Becky Fleming, Cpa, Inc Occupation Cpa
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00

Date of Receipt 12 / 23 / 2014
Transaction ID : 4239833
Amount of Each Receipt this Period 25.00

C. Ms. Barbara Fleming
Full Name (Last, First, Middle Initial)
Mailing Address 2309 SW 1st Avenue #242
City Portland State OR Zip Code 97201
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 10 / 2014
Transaction ID : 4234437
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 516 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margaret M. Fleming
 Full Name (Last, First, Middle Initial)
 Mailing Address 3817 Jocelyn Street NW
 City Washington State DC Zip Code 20015
 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 ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232013
 Amount of Each Receipt this Period
 50.00

B. Ms. Sharan Fleming
 Full Name (Last, First, Middle Initial)
 Mailing Address 4213 Curragh Oaks Ln.
 City Fair Oaks State CA Zip Code 95628
 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 ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232301
 Amount of Each Receipt this Period
 100.00

C. Mr. Robert Fleri
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 William St., Apt 431
 City Oakland State CA Zip Code 94612
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228745
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 517 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert Fleri		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
Mailing Address 600 William St., Apt 431		Transaction ID : 4241705
City Oakland	State CA	Zip Code 94612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
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	

Full Name (Last, First, Middle Initial) B. Ms. Phyllis L. Fletcher		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 27 / 2014
Mailing Address 821 E Dove Loop Rd Apt 316		Transaction ID : 4228337
City Grapevine	State TX	Zip Code 76051
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
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 ▼ 360.00	

Full Name (Last, First, Middle Initial) C. Ms. Phyllis L. Fletcher		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2014
Mailing Address 821 E Dove Loop Rd Apt 316		Transaction ID : 4241175
City Grapevine	State TX	Zip Code 76051
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
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 ▼ 360.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 518 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Sandy Flitterman-Lewis		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4233735
Mailing Address 635 Washington St.		Amount of Each Receipt this Period 45.00
City Hoboken	State NJ	Zip Code 07030
FEC ID number of contributing federal political committee. C	Name of Employer Rutgers University	
Occupation Professor		Aggregate Year-to-Date ▼ 220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Jean Flood		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238543
Mailing Address PO Box 719		Amount of Each Receipt this Period 100.00
City Kimberton	State PA	Zip Code 19442
FEC ID number of contributing federal political committee. C	Name of Employer Steiner Medical Center	
Occupation Physician		Aggregate Year-to-Date ▼ 2710.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Pamela Flowers		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2014 Transaction ID : 4235445
Mailing Address 345 Mohawk Dr.		Amount of Each Receipt this Period 25.00
City Boulder	State CO	Zip Code 80303
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation Retired		Aggregate Year-to-Date ▼ 375.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	170.00
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 519 OF 2648
	<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)
EMILY's List

A. Ms. Helen Flowers
Full Name (Last, First, Middle Initial)
Mailing Address 4545 Glenway Ave

City Cincinnati	State OH	Zip Code 45205
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	10	/	2014

Transaction ID : 4234406

Amount of Each Receipt this Period
200.00

B. Ms. Joyce Flynn
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1915

City Quogue	State NY	Zip Code 11959
----------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	06	/	2014

Transaction ID : 4233999

Amount of Each Receipt this Period
25.00

C. Ms. Joni Flynn
Full Name (Last, First, Middle Initial)
Mailing Address 5533 E Lake Dr Apt F

City Lisle	State IL	Zip Code 60532
---------------	-------------	-------------------

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 ▼
479.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	09	/	2014

Transaction ID : 4233835

Amount of Each Receipt this Period
202.00

SUBTOTAL of Receipts This Page (optional).....▶	239.00
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 520 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Flynn		Date of Receipt 12 / 03 / 2014 Transaction ID : 4231944
Mailing Address 167 Spinnaker Ave		Amount of Each Receipt this Period 250.00
City Stafford Township	State NJ	Zip Code 08050
FEC ID number of contributing federal political committee. C	Name of Employer Southern Ocean Medical Center	Occupation Registered Nurse
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Dr. Sharon Foerster		Date of Receipt 12 / 12 / 2014 Transaction ID : 4236458
Mailing Address 1625 Waterston Ave.		Amount of Each Receipt this Period 150.00
City Austin	State TX	Zip Code 78703
FEC ID number of contributing federal political committee. C	Name of Employer Academic Programs International	Occupation Professor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. Mr. Dave Fogg		Date of Receipt 12 / 17 / 2014 Transaction ID : 4237506
Mailing Address 10400 N 77th St		Amount of Each Receipt this Period 30.00
City Scottsdale	State AZ	Zip Code 85258
FEC ID number of contributing federal political committee. C	Name of Employer None	Occupation None
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional).....▶	205.00
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 521 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Dave Fogg		Date of Receipt
Mailing Address 10400 N 77th St		M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014
City	State	Zip Code
Scottsdale	AZ	85258
FEC ID number of contributing federal political committee.		Transaction ID : 4234083
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		35.00
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	275.00	

Full Name (Last, First, Middle Initial) B. Mr. Dave Fogg		Date of Receipt
Mailing Address 10400 N 77th St		M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014
City	State	Zip Code
Scottsdale	AZ	85258
FEC ID number of contributing federal political committee.		Transaction ID : 4240906
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		35.00
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	275.00	

Full Name (Last, First, Middle Initial) C. Mr. William T. Foley		Date of Receipt
Mailing Address 20720 Willow Pond Rd		M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
City	State	Zip Code
Cornelius	NC	28031
FEC ID number of contributing federal political committee.		Transaction ID : 4228751
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		30.00
Name of Employer	Occupation	
Davidson College	College Professor	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	360.00	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 522 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Mr. William T. Foley
 Full Name (Last, First, Middle Initial)
 Mailing Address 20720 Willow Pond Rd
 City Cornelius State NC Zip Code 28031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Davidson College Occupation College Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 12 / 28 / 2014
Transaction ID : 4242030
 Amount of Each Receipt this Period
 30.00

B. Audrey Foley
 Full Name (Last, First, Middle Initial)
 Mailing Address 630 W. Bonita Ave., Apt. 2m
 City Claremont State CA Zip Code 91711
 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 ▼ 732.00

Date of Receipt
 12 / 01 / 2014
Transaction ID : 4230428
 Amount of Each Receipt this Period
 25.00

C. Audrey Foley
 Full Name (Last, First, Middle Initial)
 Mailing Address 630 W. Bonita Ave., Apt. 2m
 City Claremont State CA Zip Code 91711
 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 ▼ 732.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236551
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 523 OF 2648
	<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)
EMILY's List

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

Mailing Address 52 Toby Hill Road

City Westbrook State CT Zip Code 06498

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

Name of Employer Whelen Engineering Co., Inc. Occupation Automation Technician

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
11 / 25 / 2014

Transaction ID : 4229688

Amount of Each Receipt this Period
50.00

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

Mailing Address 52 Toby Hill Road

City Westbrook State CT Zip Code 06498

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

Name of Employer Whelen Engineering Co., Inc. Occupation Automation Technician

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
12 / 26 / 2014

Transaction ID : 4240823

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Ms. Elisabeth Fonseca

Mailing Address 56 Stonegate Court

City Carmel State NY Zip Code 10512

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

Name of Employer Self-Employed Occupation Psychologist

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
12 / 20 / 2014

Transaction ID : 4239142

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **125.00**

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 524 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mike Foohy
 Full Name (Last, First, Middle Initial)
 Mailing Address 64 Park Place
 City Maggie Valley State NC Zip Code 28751
 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 ▼
 538.00

Date of Receipt
 12 / 01 / 2014
Transaction ID : 4230247
 Amount of Each Receipt this Period
 15.00

B. Mike Foohy
 Full Name (Last, First, Middle Initial)
 Mailing Address 64 Park Place
 City Maggie Valley State NC Zip Code 28751
 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 ▼
 538.00

Date of Receipt
 12 / 20 / 2014
Transaction ID : 4239235
 Amount of Each Receipt this Period
 15.00

C. Mike Foohy
 Full Name (Last, First, Middle Initial)
 Mailing Address 64 Park Place
 City Maggie Valley State NC Zip Code 28751
 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 ▼
 538.00

Date of Receipt
 12 / 04 / 2014
Transaction ID : 4232185
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 525 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sylvia Ford		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237894
Mailing Address 700 Greenlawn Dr		Amount of Each Receipt this Period 200.00
City Columbia	State SC	Zip Code 29209
FEC ID number of contributing federal political committee. C		
Name of Employer Us Gov	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Ms. Jean Fordis		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2014 Transaction ID : 4242943
Mailing Address 280 Los Altos Court		Amount of Each Receipt this Period 100.00
City Los Altos	State CA	Zip Code 94022
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mr. Charles Q. Forester		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227593
Mailing Address 1266 Fulton Street		Amount of Each Receipt this Period 500.00
City San Francisco	State CA	Zip Code 94117
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 526 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Muriel M. Forlenza
 Full Name (Last, First, Middle Initial)
 Mailing Address 1452 S.E. Andrews St.
 City State Zip Code
 Stuart FL 34996
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237432
 Amount of Each Receipt this Period
 50.00

B. Ms. Roger Forman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1374 Murray St
 City State Zip Code
 Saint Paul MN 55116
 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 ▼
 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239145
 Amount of Each Receipt this Period
 10.00

C. Ms. Roger Forman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1374 Murray St
 City State Zip Code
 Saint Paul MN 55116
 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 ▼
 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239836
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 527 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Roger Forman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1374 Murray St
 City Saint Paul State MN Zip Code 55116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234955
 Amount of Each Receipt this Period
 25.00

B. Ms. Catherine R. Forman
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Sanford Rd.
 City Woodbridge State CT Zip Code 06525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Scsu Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4243047
 Amount of Each Receipt this Period
 100.00

C. Mr. David J. Fornari
 Full Name (Last, First, Middle Initial)
 Mailing Address 737 S.W. Great Exuma Cv.
 City Port Saint Lucie State FL Zip Code 34986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232621
 Amount of Each Receipt this Period
 225.00

SUBTOTAL of Receipts This Page (optional).....▶	350.00
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 528 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Gail Forrest		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2014
Mailing Address 578 Washington Blvd #930		Transaction ID : 4239150
City Marina Del Rey	State CA	Zip Code 90292
FEC ID number of contributing federal political committee.	C	
Name of Employer Self	Occupation Video Producer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	
		Amount of Each Receipt this Period 25.00

Full Name (Last, First, Middle Initial) B. Ms. Barbara Louise Forster		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2014
Mailing Address 901 S. 2nd St. #603		Transaction ID : 4243088
City Minneapolis	State MN	Zip Code 55415
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 ▼ 2000.00	
		Amount of Each Receipt this Period 1000.00

Full Name (Last, First, Middle Initial) C. Ms. Peggy S. Fort		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014
Mailing Address 18 Bennett Labe		Transaction ID : 4230430
City Stony Brook	State NY	Zip Code 11790
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 ▼ 243.00	
		Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
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 529 OF 2648
	(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)
EMILY's List

A. Ms. Sheila Fortune
Full Name (Last, First, Middle Initial)
Mailing Address 1304 8th Street

City Boulder	State CO	Zip Code 80302
-----------------	-------------	-------------------

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

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

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
12	/	01	/	2014

Transaction ID : 4230431

Amount of Each Receipt this Period
300.00

B. Patricia Foschi
Full Name (Last, First, Middle Initial)
Mailing Address 538 Garcia St

City Santa Fe	State NM	Zip Code 87505
------------------	-------------	-------------------

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 ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228756

Amount of Each Receipt this Period
300.00

C. Patricia Foschi
Full Name (Last, First, Middle Initial)
Mailing Address 538 Garcia St

City Santa Fe	State NM	Zip Code 87505
------------------	-------------	-------------------

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 ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241706

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	350.00
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 530 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Donna Fossum
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 N Pickett St Unit 611
 City Alexandria State VA Zip Code 22304
 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 ▼
 525.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236828
 Amount of Each Receipt this Period
 50.00

B. Ms. Mimi M. Fossum
 Full Name (Last, First, Middle Initial)
 Mailing Address 132 Jordy Rd
 City Huntsville State TX Zip Code 77320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231581
 Amount of Each Receipt this Period
 20.00

C. Alyce Foster
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 Crossroads Blvd. #383
 City Carmel State CA Zip Code 93923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Dvm Relief Services Veterinarian
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 262.50

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4238547
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 531 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Clinton R. Foulk
 Full Name (Last, First, Middle Initial)
 Mailing Address 3315 Allamanda Ct
 City State Zip Code
 Kissimmee FL 34759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 01 / 2014
Transaction ID : 4230433
 Amount of Each Receipt this Period
 50.00

B. Ms. Lynne S. Fovinci
 Full Name (Last, First, Middle Initial)
 Mailing Address 1795 Oak Ave.
 City State Zip Code
 Menlo Park CA 94025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Elo Touch Solutions Controller
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 263.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230434
 Amount of Each Receipt this Period
 113.00

C. Duncan & Sally Fowler
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 Mills Woods Trail
 City State Zip Code
 Buffalo MN 55313
 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 ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228757
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 183.00
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 532 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Duncan & Sally Fowler

Mailing Address 110 Mills Woods Trail

City Buffalo State MN Zip Code 55313

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 ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229600

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Duncan & Sally Fowler

Mailing Address 110 Mills Woods Trail

City Buffalo State MN Zip Code 55313

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 ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241448

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Duncan & Sally Fowler

Mailing Address 110 Mills Woods Trail

City Buffalo State MN Zip Code 55313

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 ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241449

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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 533 OF 2648
	<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)
EMILY's List

A. Ms. Kathleen F. Fowler
 Full Name (Last, First, Middle Initial)
 Mailing Address 425 Moseley Rd
 City Hillsborough State CA Zip Code 94010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Accountant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 12 / 05 / 2014
Transaction ID : 4232933
 Amount of Each Receipt this Period
 100.00

B. Mr. Gregory A Fowler
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 390689
 City Mountain View State CA Zip Code 94039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4238548
 Amount of Each Receipt this Period
 40.00

C. Ms. Mary F. Fox
 Full Name (Last, First, Middle Initial)
 Mailing Address 511 N.W. 162nd St.
 City Shoreline State WA Zip Code 98177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Healthtrends Occupation Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4238550
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	155.00
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 534 OF 2648
	(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

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)
EMILY's List

A. Ms. Mary F. Fox
Full Name (Last, First, Middle Initial)
Mailing Address 511 N.W. 162nd St.
City Shoreline State WA Zip Code 98177
FEC ID number of contributing federal political committee. **C**
Name of Employer Healthtrends Occupation Administrator
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **215.00**

Date of Receipt **12 / 19 / 2014**
Transaction ID : 4238549
Amount of Each Receipt this Period **100.00**

B. Norma Fox
Full Name (Last, First, Middle Initial)
Mailing Address 1136 Carissa Ct.
City Bonne Terre State MO Zip Code 63628
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **225.00**

Date of Receipt **12 / 06 / 2014**
Transaction ID : 4232513
Amount of Each Receipt this Period **25.00**

C. Ms. Roberta Fox
Full Name (Last, First, Middle Initial)
Mailing Address 1854 Kentucky Pl.
City Costa Mesa State CA Zip Code 92626
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **575.00**

Date of Receipt **12 / 12 / 2014**
Transaction ID : 4235221
Amount of Each Receipt this Period **225.00**

SUBTOTAL of Receipts This Page (optional)..... **350.00**
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 535 OF 2648
	<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)
EMILY's List

A. Ms. Eva Fox
Full Name (Last, First, Middle Initial)
Mailing Address 913 37th St.
City Anacortes State WA Zip Code 98221
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 ▼ 300.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239838
Amount of Each Receipt this Period
25.00

B. Mrs. Lynda K Fox
Full Name (Last, First, Middle Initial)
Mailing Address 19630 Juna Ln.
City Saratoga State CA Zip Code 95070
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 ▼ 1950.00

Date of Receipt
12 / 10 / 2014
Transaction ID : 4234532
Amount of Each Receipt this Period
100.00

C. Brenda Fox
Full Name (Last, First, Middle Initial)
Mailing Address 3001 Cambridge PI NW
City Washington State DC Zip Code 20007
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Artist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 370.00

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234059
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
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 536 OF 2648
	<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)
EMILY's List

A. Rebecca Fox
Full Name (Last, First, Middle Initial)
Mailing Address 7505 Danwood Drive
City Austin State TX Zip Code 78759
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 420.00

Date of Receipt 12 / 19 / 2014
Transaction ID : 4238551
Amount of Each Receipt this Period 35.00

B. Mr. Donald Foxworthy
Full Name (Last, First, Middle Initial)
Mailing Address 7 Rawson Road
City Brookline State MA Zip Code 02445
FEC ID number of contributing federal political committee. **C**
Name of Employer Harvard Vanguard Medical Associates Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 08 / 2014
Transaction ID : 4233439
Amount of Each Receipt this Period 50.00

C. Mr. Sally Allen Frame
Full Name (Last, First, Middle Initial)
Mailing Address PO Box
City Kinsley State KS Zip Code 67547
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 585.00

Date of Receipt 12 / 10 / 2014
Transaction ID : 4234478
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
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 537 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Hertzberg Fran

Mailing Address 24 Carter St.

City Norwood State NJ Zip Code 07648

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234802

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Anna Kay France

Mailing Address 27 Brantford Place

City Buffalo State NY Zip Code 14222

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 ▼
485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229661

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Anna Kay France

Mailing Address 27 Brantford Place

City Buffalo State NY Zip Code 14222

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 ▼
485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238553

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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 538 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. George Frandsen		Date of Receipt
Mailing Address PO Box 4043		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
Sequim	WA	98382
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
International Org Of Folk Art	Nonprofit Ed	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="693.34"/>	
		Transaction ID : 4233634
		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Nancy Frane		Date of Receipt
Mailing Address 38 Southbourne Rd.		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
Jamaica Plain	MA	02130
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="313.00"/>	
		Transaction ID : 4242522
		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>

Full Name (Last, First, Middle Initial) C. Karen Franevsky		Date of Receipt
Mailing Address 6317 E Rancho Del Oro		<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cave Creek	AZ	85331
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	
		Transaction ID : 4238084
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="315.00"/>
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: (check only one)	PAGE 539 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Brenda Frank		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233273
Mailing Address 9360 West Flamingo Rd #110-426		Amount of Each Receipt this Period 300.00
City Las Vegas	State NV	Zip Code 89147
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation Retired		Aggregate Year-to-Date ▼ 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Ruella Frank		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230437
Mailing Address 124 W. 93rd St., Apt. 2c		Amount of Each Receipt this Period 150.00
City New York	State NY	Zip Code 10025
FEC ID number of contributing federal political committee. C	Name of Employer REQUESTED	
Occupation REQUESTED		Aggregate Year-to-Date ▼ 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Marion Frank		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4234781
Mailing Address 7800 Lincoln Dr.		Amount of Each Receipt this Period 100.00
City Philadelphia	State PA	Zip Code 19118
FEC ID number of contributing federal political committee. C	Name of Employer Self	
Occupation Psychologist		Aggregate Year-to-Date ▼ 335.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 540 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Joan Frank
Full Name (Last, First, Middle Initial)

Mailing Address 9711 Caney Place

City Silver Spring State MD Zip Code 20910

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

Name of Employer Sgt Occupation Project Lead

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
 11 / 27 / 2014

Transaction ID : 4228355

Amount of Each Receipt this Period
 25.00

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

Mailing Address 9711 Caney Place

City Silver Spring State MD Zip Code 20910

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

Name of Employer Sgt Occupation Project Lead

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
 12 / 27 / 2014

Transaction ID : 4241188

Amount of Each Receipt this Period
 25.00

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

Mailing Address 117 West 17th St.

City New York State NY Zip Code 10011

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4230194

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 541 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Donna Frankel		Date of Receipt M M / D D / Y Y Y Y 12 / 25 / 2014 Transaction ID : 4244912
Mailing Address 117 West 17th St.		Amount of Each Receipt this Period 20.00
City New York	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Loretta Franklin		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238554
Mailing Address 9 preston road		Amount of Each Receipt this Period 15.00
City Somerville	State MA	Zip Code 02143
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Sally Frasier		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239840
Mailing Address 7204 Sleepy Hollow Drive		Amount of Each Receipt this Period 15.00
City Tulsa	State OK	Zip Code 74136
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1015.00	

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 542 OF 2648
	<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)
EMILY's List

A. Ms. Kelly A Frawley
Full Name (Last, First, Middle Initial)

Mailing Address 401 NE 60th St

City Seattle State WA Zip Code 98115

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

Name of Employer Boreal Songbird Initiative Occupation Professional

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233443

Amount of Each Receipt this Period
 20.00

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

Mailing Address 18 Willow Rd.

City Harvard State MA Zip Code 01451

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

Name of Employer None Occupation None

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 / 28 / 2014
Transaction ID : 4228759

Amount of Each Receipt this Period
 10.00

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

Mailing Address 18 Willow Rd.

City Harvard State MA Zip Code 01451

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

Name of Employer None Occupation None

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
 12 / 28 / 2014
Transaction ID : 4241451

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 543 OF 2648
	<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)
EMILY's List

A. Pamela Frederick
Full Name (Last, First, Middle Initial)
Mailing Address 18 Willow Rd.
City Harvard State MA Zip Code 01451
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239842
Amount of Each Receipt this Period
15.00

B. Edith Frederick
Full Name (Last, First, Middle Initial)
Mailing Address 121 Winham Street
City Salinas State CA Zip Code 93901
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 ▼ 220.00

Date of Receipt
12 / 13 / 2014
Transaction ID : 4236259
Amount of Each Receipt this Period
10.00

C. Edith Frederick
Full Name (Last, First, Middle Initial)
Mailing Address 121 Winham Street
City Salinas State CA Zip Code 93901
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 ▼ 220.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239843
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 35.00
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 544 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Stacey Fredericks		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230438
Mailing Address 33 W. 93rd Street, Apt. 5B		Amount of Each Receipt this Period 500.00
City New York	State NY	Zip Code 10025
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mr. Leif Fredin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2014 Transaction ID : 4235464
Mailing Address 7551 Frieoak Drive		Amount of Each Receipt this Period 25.00
City Austin	State TX	Zip Code 78759
FEC ID number of contributing federal political committee. C		
Name of Employer Lgrf Consulting, Inc.	Occupation President & Ceo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2935.00	

Full Name (Last, First, Middle Initial) C. Mr. Leif Fredin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238555
Mailing Address 7551 Frieoak Drive		Amount of Each Receipt this Period 50.00
City Austin	State TX	Zip Code 78759
FEC ID number of contributing federal political committee. C		
Name of Employer Lgrf Consulting, Inc.	Occupation President & Ceo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2935.00	

SUBTOTAL of Receipts This Page (optional).....▶	575.00
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 545 OF 2648
	<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)
EMILY's List

A. Leigh Fredrickson
Full Name (Last, First, Middle Initial)
Mailing Address 27196 County Road 267

City Puxico	State MO	Zip Code 63960
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	17	/	2014

Transaction ID : 4237866

Amount of Each Receipt this Period
100.00

B. Leigh Fredrickson
Full Name (Last, First, Middle Initial)
Mailing Address 27196 County Road 267

City Puxico	State MO	Zip Code 63960
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2014

Transaction ID : 4243331

Amount of Each Receipt this Period
100.00

C. Ms. Tema Freed
Full Name (Last, First, Middle Initial)
Mailing Address 191 Presidential Blvd. #920

City Bala Cynwyd	State PA	Zip Code 19004
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4232143

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	210.00
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 546 OF 2648
	<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)
EMILY's List

A. Macon Freeman
Full Name (Last, First, Middle Initial)
Mailing Address 5460 Diane Way
City Santa Rosa State CA Zip Code 95409
FEC ID number of contributing federal political committee. **C**
Name of Employer Agilent Technologies Occupation Technical Writer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 05 / 2014
Transaction ID : 4232839
Amount of Each Receipt this Period
20.00

B. Michael Freeman
Full Name (Last, First, Middle Initial)
Mailing Address 3507 Flintwood Dr
City Santa Rosa State CA Zip Code 95404
FEC ID number of contributing federal political committee. **C**
Name of Employer Keysight Technologies Occupation Engineer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228760
Amount of Each Receipt this Period
15.00

C. Michael Freeman
Full Name (Last, First, Middle Initial)
Mailing Address 3507 Flintwood Dr
City Santa Rosa State CA Zip Code 95404
FEC ID number of contributing federal political committee. **C**
Name of Employer Keysight Technologies Occupation Engineer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241308
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 547 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Lucile C. Freeman		Date of Receipt
Mailing Address 4708 Dorset Ave		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chevy Chase	MD	20815
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4230184
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1200.00"/>	

Full Name (Last, First, Middle Initial) B. Mrs. Lucile C. Freeman		Date of Receipt
Mailing Address 4708 Dorset Ave		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chevy Chase	MD	20815
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4240851
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1200.00"/>	

Full Name (Last, First, Middle Initial) C. Dr. Shirley V. Freeman		Date of Receipt
Mailing Address 724 Eaton St.		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Key West	FL	33040
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4232387
Name of Employer	Occupation	Amount of Each Receipt this Period
Requested	Requested	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1200.00"/>
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 548 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Susan Freimuth
 Full Name (Last, First, Middle Initial)
 Mailing Address 75 Burnap Brook Rd.
 City Andover State CT Zip Code 06232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aetna Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234244
 Amount of Each Receipt this Period
 20.00

B. Andrew Freireich
 Full Name (Last, First, Middle Initial)
 Mailing Address 366 Broadway
 City New York State NY Zip Code 10013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241022
 Amount of Each Receipt this Period
 500.00

C. Mr. Keith A. French
 Full Name (Last, First, Middle Initial)
 Mailing Address 649 Milwaukee St
 City Denver State CO Zip Code 80206
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231867
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.00
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 549 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathleen French		Date of Receipt 12 / 15 / 2014 Transaction ID : 4244792
Mailing Address 13466 Mango Drive		Amount of Each Receipt this Period 20.00
City Del Mar	State CA	Zip Code 92014
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 440.00	
Name of Employer University Of California San Diego	Occupation Professor Emeritus	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Kathleen French		Date of Receipt 12 / 16 / 2014 Transaction ID : 4237151
Mailing Address 13466 Mango Drive		Amount of Each Receipt this Period 25.00
City Del Mar	State CA	Zip Code 92014
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 440.00	
Name of Employer University Of California San Diego	Occupation Professor Emeritus	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Kathleen French		Date of Receipt 11 / 26 / 2014 Transaction ID : 4227898
Mailing Address 13466 Mango Drive		Amount of Each Receipt this Period 35.00
City Del Mar	State CA	Zip Code 92014
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 440.00	
Name of Employer University Of California San Diego	Occupation Professor Emeritus	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 550 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathleen French			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240810
Mailing Address 13466 Mango Drive			Amount of Each Receipt this Period 35.00
City Del Mar	State CA	Zip Code 92014	
FEC ID number of contributing federal political committee. C			
Name of Employer University Of California San Diego	Occupation Professor Emeritus		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00		

Full Name (Last, First, Middle Initial) B. Krystyna Frenkel			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230071
Mailing Address 305 E. 40th Street Apt.. 5d			Amount of Each Receipt this Period 15.00
City New York	State NY	Zip Code 10016	
FEC ID number of contributing federal political committee. C			
Name of Employer Nyu Medical School, Retired	Occupation Biomedical Scientist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) C. Krystyna Frenkel			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234517
Mailing Address 305 E. 40th Street Apt.. 5d			Amount of Each Receipt this Period 15.00
City New York	State NY	Zip Code 10016	
FEC ID number of contributing federal political committee. C			
Name of Employer Nyu Medical School, Retired	Occupation Biomedical Scientist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 551 OF 2648
	<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)
EMILY's List

A. Krystyna Frenkel
Full Name (Last, First, Middle Initial)

Mailing Address 305 E. 40th Street
Apt.. 5d

City New York State NY Zip Code 10016

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

Name of Employer Nyu Medical School, Retired Occupation Biomedical Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239844

Amount of Each Receipt this Period
15.00

B. Ms. Ruth Freymann
Full Name (Last, First, Middle Initial)

Mailing Address 355 Blackstone Blvd Apt 201

City Providence State RI Zip Code 02906

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 ▼ **750.00**

Date of Receipt
12 / 03 / 2014
Transaction ID : 4232043

Amount of Each Receipt this Period
50.00

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

Mailing Address 400 County Highway 58

City Oneonta State NY Zip Code 13820

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
12 / 12 / 2014
Transaction ID : 4236012

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... **90.00**

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 552 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Mrs. John Billingsley Friedericy		Date of Receipt
Mailing Address 8480 Hillside Ave		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City State Zip Code Los Angeles CA 90069		Transaction ID : 4230442
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Self	Occupation Actor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Mrs. Adele Friedland		Date of Receipt
Mailing Address 1930 Broadway Apt 23c		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code New York NY 10023		Transaction ID : 4234723
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Marc Friedman		Date of Receipt
Mailing Address 8212 Ripple Ridge Dr		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City State Zip Code Darien IL 60561		Transaction ID : 4232525
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="410.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="220.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 553 OF 2648
	<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)
EMILY's List

A. Ms. Ilene Friedman
Full Name (Last, First, Middle Initial)
Mailing Address 5023 Ashley Pkwy
City Sarasota State FL Zip Code 34241
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 ▼ 320.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : 4232797
Amount of Each Receipt this Period
60.00

B. Karen Friedman
Full Name (Last, First, Middle Initial)
Mailing Address 1999 Harrison Street Suite 2210
City Oakland State CA Zip Code 94612
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1355.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2014
Transaction ID : 4239201
Amount of Each Receipt this Period
15.00

C. Lee Ann Friedman
Full Name (Last, First, Middle Initial)
Mailing Address 29 Swanson Road
City Framingham State MA Zip Code 01701
FEC ID number of contributing federal political committee. **C**
Name of Employer Town Of Framingham Occupation EsL Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 09 / 2014
Transaction ID : 4234114
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 554 OF 2648
	<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	

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)
EMILY's List

A. Ms. Jane Friebling
Full Name (Last, First, Middle Initial)

Mailing Address 3399 W. School House Ln.

City Philadelphia State PA Zip Code 19129

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

Name of Employer South Jersey Gastro Occupation PHYSICIAN

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 / 25 / 2014

Transaction ID : 4226728

Amount of Each Receipt this Period
 300.00

B. Ms. Mildred Jean Friend
Full Name (Last, First, Middle Initial)

Mailing Address 2374 Sapphire Lane

City East Lansing State MI Zip Code 48823

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

Name of Employer Requested Occupation Requested

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
 12 / 10 / 2014

Transaction ID : 4234331

Amount of Each Receipt this Period
 150.00

C. Ms. Ava Frisinger
Full Name (Last, First, Middle Initial)

Mailing Address 415 SE Bush Street

City Issaquah State WA Zip Code 98027

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014

Transaction ID : 4232617

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 465.00

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 555 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Carl Fritzsche			Date of Receipt		
Mailing Address PO Box 12405			M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014		
City State Zip Code Tucson AZ 85732			Transaction ID : 4239518		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 150.00		
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			

Full Name (Last, First, Middle Initial) B. Ms. Patricia P. Frounfelter			Date of Receipt		
Mailing Address 1061 Cougar Lake Rd			M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014		
City State Zip Code Ishpeming MI 49849			Transaction ID : 4244793		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 20.00		
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 ▼ 365.00			

Full Name (Last, First, Middle Initial) C. Ms. Nancy Frumen			Date of Receipt		
Mailing Address 1193 Pinehurst RD			M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014		
City State Zip Code Staunton VA 24401			Transaction ID : 4236591		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 20.00		
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 ▼ 220.00			

SUBTOTAL of Receipts This Page (optional).....▶	190.00
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 556 OF 2648
	<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)
EMILY's List

A. Galen Frysinger
Full Name (Last, First, Middle Initial)

Mailing Address 2109 Carmen Avenue

City Sheboygan State WI Zip Code 53081

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 ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014

Transaction ID : 4235400

Amount of Each Receipt this Period
10.00

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

Mailing Address 2109 Carmen Avenue

City Sheboygan State WI Zip Code 53081

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 ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4239845

Amount of Each Receipt this Period
10.00

C. Ms. Dawn N. Fudge
Full Name (Last, First, Middle Initial)

Mailing Address 1318 Nance St

City Houston State TX Zip Code 77002

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

Name of Employer Self Occupation Restaurant Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014

Transaction ID : 4235491

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **120.00**

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 557 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Melody M. Fujimori
 Full Name (Last, First, Middle Initial)
 Mailing Address 634 Glorietta Blvd
 634 Glorietta Blvd
 City Lafayette State CA Zip Code 94549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236867
 Amount of Each Receipt this Period
 35.00

B. Ms. Patricia Fuller
 Full Name (Last, First, Middle Initial)
 Mailing Address 36425 Christine St.
 City Newark State CA Zip Code 94560
 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 ▼ 612.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237499
 Amount of Each Receipt this Period
 51.00

C. Joan E. Fuquay
 Full Name (Last, First, Middle Initial)
 Mailing Address 8434 Grizzly Flat Road
 City Somerset State CA Zip Code 95684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sierra Foothills Aids Foundation Occupation Case Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236260
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	106.00
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 558 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Jody Furlong

Mailing Address 2238 N Dayton St.

City Chicago	State IL	Zip Code 60614
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	13	/	2014

Transaction ID : 4236111

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
B. Mrs. Shirley A Furst

Mailing Address 19800 SW Touchmark Way #386

City Bend	State OR	Zip Code 97702
--------------	-------------	-------------------

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 ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	15	/	2014

Transaction ID : 4236642

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Mrs. Shirley A Furst

Mailing Address 19800 SW Touchmark Way #386

City Bend	State OR	Zip Code 97702
--------------	-------------	-------------------

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 ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2014

Transaction ID : 4233699

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 559 OF 2648
	<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)
EMILY's List

A. Barbara Fusco
Full Name (Last, First, Middle Initial)
Mailing Address 57865 Morton Street
City Marathon State FL Zip Code 33050
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232731
Amount of Each Receipt this Period
15.00

B. Mr. David G. Futch
Full Name (Last, First, Middle Initial)
Mailing Address 6217 Boulder Lake Ave
City San Diego State CA Zip Code 92119
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 305.00

Date of Receipt
12 / 14 / 2014
Transaction ID : 4235401
Amount of Each Receipt this Period
10.00

C. Mr. David G. Futch
Full Name (Last, First, Middle Initial)
Mailing Address 6217 Boulder Lake Ave
City San Diego State CA Zip Code 92119
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 305.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238558
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00
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 560 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Roberta Futterman		Date of Receipt
Mailing Address 225 Crescenzi Court		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City State Zip Code West Orange NJ 07052		Transaction ID : 4232151
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="200.00"/>
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 ▼ <input type="text" value="255.00"/>	

Full Name (Last, First, Middle Initial) B. Pat Gaarder		Date of Receipt
Mailing Address 1516 Pascal Street N		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City State Zip Code St Paul MN 55018		Transaction ID : 4239465
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer None	Occupation Unemployed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Barbara Gaborko		Date of Receipt
Mailing Address 39638 Freemark Abbey		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City State Zip Code Murrieta CA 92563		Transaction ID : 4244794
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="325.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="145.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 561 OF 2648
	(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)
EMILY's List

A. Ms. Inra Gadd
Full Name (Last, First, Middle Initial)
Mailing Address 305 E. 24 St. - #9a

City New York	State NY	Zip Code 10010
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Psychoanalyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2014
Transaction ID : 4228296

Amount of Each Receipt this Period
10.00

B. Ms. Inra Gadd
Full Name (Last, First, Middle Initial)
Mailing Address 305 E. 24 St. - #9a

City New York	State NY	Zip Code 10010
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Psychoanalyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4239847

Amount of Each Receipt this Period
10.00

c. Ms. Inra Gadd
Full Name (Last, First, Middle Initial)
Mailing Address 305 E. 24 St. - #9a

City New York	State NY	Zip Code 10010
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Psychoanalyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2014
Transaction ID : 4241151

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 562 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kathleen Gaffney , M.D.			Date of Receipt
Mailing Address 590 Concord Ave			<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4242040
Williston Park	NY	11596	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="240.00"/>
Name of Employer	Occupation		
None	None		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>		

Full Name (Last, First, Middle Initial) B. Kathleen Gaffney , M.D.			Date of Receipt
Mailing Address 590 Concord Ave			<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4228767
Williston Park	NY	11596	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="250.00"/>
Name of Employer	Occupation		
None	None		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>		

Full Name (Last, First, Middle Initial) C. James Gage			Date of Receipt
Mailing Address 115 Schmidt Rd			<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4238011
Sherburne	NY	13460	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer	Occupation		
REQUESTED	REQUESTED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="590.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 563 OF 2648
	<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)
EMILY's List

A. Ms. Marianne Gagen
Full Name (Last, First, Middle Initial)
Mailing Address 22 Toyon Terrace

City Danville	State CA	Zip Code 94526
------------------	-------------	-------------------

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 ▼
1175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2014

Transaction ID : 4239234

Amount of Each Receipt this Period
50.00

B. Ms. Marianne Gagen
Full Name (Last, First, Middle Initial)
Mailing Address 22 Toyon Terrace

City Danville	State CA	Zip Code 94526
------------------	-------------	-------------------

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 ▼
1175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4239848

Amount of Each Receipt this Period
50.00

C. Ms. Linda Gagnon
Full Name (Last, First, Middle Initial)
Mailing Address 638 Cedar Ridge Lane

City Mechanicsburg	State PA	Zip Code 17055
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	05	/	2014

Transaction ID : 4232704

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 564 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Wilma J. Gahagan
Full Name (Last, First, Middle Initial)

Mailing Address 5537 E. Paradise Dr.

City State Zip Code
Scottsdale AZ 85254

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2014

Transaction ID : 4231013

Amount of Each Receipt this Period
200.00

B. Ms. Kathryn Gaillour
Full Name (Last, First, Middle Initial)

Mailing Address 3505 Saddlestring Trl

City State Zip Code
Austin TX 78739

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.21

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2014

Transaction ID : 4237190

Amount of Each Receipt this Period
8.21

C. Ms. Kathryn Gaillour
Full Name (Last, First, Middle Initial)

Mailing Address 3505 Saddlestring Trl

City State Zip Code
Austin TX 78739

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.21

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014

Transaction ID : 4237756

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	238.21
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 565 OF 2648
	<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)
EMILY's List

A. Ms. Kristine Gainer
Full Name (Last, First, Middle Initial)
Mailing Address 2917 Crabapple Ln.
City Ellicott City State MD Zip Code 21042
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt
12 / 14 / 2014
Transaction ID : 4235434
Amount of Each Receipt this Period
15.00

B. Ms. Kristine Gainer
Full Name (Last, First, Middle Initial)
Mailing Address 2917 Crabapple Ln.
City Ellicott City State MD Zip Code 21042
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt
12 / 22 / 2014
Transaction ID : 4239405
Amount of Each Receipt this Period
15.00

C. Mrs. Virginia Gaines
Full Name (Last, First, Middle Initial)
Mailing Address 52 Estambre Rd.
City Santa Fe State NM Zip Code 87508
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 10 / 2014
Transaction ID : 4234617
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 566 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. George Gaines

Mailing Address 3700 Kanawha St. NW

City Washington State DC Zip Code 20015

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 ▼
335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231781

Amount of Each Receipt this Period
85.00

Full Name (Last, First, Middle Initial)
B. Ms. Mary-Dillon D. Galbraith

Mailing Address 3930 N. Harcourt Pl.

City Shorewood State WI Zip Code 53211

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

Name of Employer Occupation
Self Musician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237592

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Ms. Mary-Dillon D. Galbraith

Mailing Address 3930 N. Harcourt Pl.

City Shorewood State WI Zip Code 53211

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

Name of Employer Occupation
Self Musician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235486

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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 567 OF 2648
	<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)
EMILY's List

A. Mr. Walter S. Galitzki
Full Name (Last, First, Middle Initial)

Mailing Address 3460 N. Mission Road W

City State Zip Code
Bremerton WA 98312

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
244.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 10 / 2014
Transaction ID : 4234556

Amount of Each Receipt this Period
22.00

B. Ms. Sandra Gallaher
Full Name (Last, First, Middle Initial)

Mailing Address 2002 Echo Springs Cir.

City State Zip Code
St George UT 84790

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

Name of Employer Occupation
None Clinical Psychologist

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
12 / 11 / 2014
Transaction ID : 4234830

Amount of Each Receipt this Period
50.00

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

Mailing Address 2678 Grandoaks Dr

City State Zip Code
Westlake Village CA 91361

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : 4232883

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	92.00
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 568 OF 2648
	<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)
EMILY's List

A. Suzanne Gallant
Full Name (Last, First, Middle Initial)

Mailing Address 2678 Grandoaks Dr

City Westlake Village State CA Zip Code 91361

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 ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : 4244795

Amount of Each Receipt this Period
200.00

B. Ms. Alison Gallaway
Full Name (Last, First, Middle Initial)

Mailing Address 7232 County Road 120

City Marble Falls State TX Zip Code 78654

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

Name of Employer Alison Gallaway, Attorney At Law Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : 4243109

Amount of Each Receipt this Period
200.00

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

Mailing Address 1100 N Ontario St
1100 N Ontario St

City Burbank State CA Zip Code 91505

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

Name of Employer Burbank Usd Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **251.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014

Transaction ID : 4241816

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **270.00**

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 569 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathleen R Gallivan		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239849
Mailing Address 1610 Hotchkin Drive		Amount of Each Receipt this Period 200.00
City Novato	State CA	Zip Code 94947
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 220.00
Name of Employer None	Occupation None	Aggregate Year-to-Date ▼ 220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Elizabeth Gallman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014 Transaction ID : 4235215
Mailing Address 2111 E Queens Way		Amount of Each Receipt this Period 150.00
City Bloomington	State IN	Zip Code 47401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
Name of Employer Self Employed	Occupation Property Management	Aggregate Year-to-Date ▼ 450.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Judith T. Galloway		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236850
Mailing Address 23 Maplewood Rd		Amount of Each Receipt this Period 100.00
City Asheville	State NC	Zip Code 28804
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 635.00
Name of Employer None	Occupation None	Aggregate Year-to-Date ▼ 635.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	270.00
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 570 OF 2648
	<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)
EMILY's List

A. Ms. Melanie A. Galloway
Full Name (Last, First, Middle Initial)

Mailing Address 11128 Innsbrook Way

City Ijamsville State MD Zip Code 21754

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

Name of Employer Us Nuclear Regulatory Commission Occupation Federal Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt
12 / 01 / 2014
Transaction ID : 4231014

Amount of Each Receipt this Period
90.00

B. Ms. Nancy Gallt
Full Name (Last, First, Middle Initial)

Mailing Address 273 Charlton Avenue

City South Orange State NJ Zip Code 07079

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

Name of Employer Self Occupation Literary Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231981

Amount of Each Receipt this Period
250.00

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

Mailing Address 6240 Kipps Colony Ct., 303

City Gulfport State FL Zip Code 33707

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
11 / 28 / 2014
Transaction ID : 4228771

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... **365.00**

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 571 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Julie Gammack
 Full Name (Last, First, Middle Initial)
 Mailing Address 6240 Kipps Colony Ct., 303
 City State Zip Code
 Gulfport FL 33707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Consultant
 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
 12 / 28 / 2014
Transaction ID : 4241269
 Amount of Each Receipt this Period
 25.00

B. Mrs. Bryna G. Gamson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2823 Summit Ave.
 City State Zip Code
 Highland Park IL 60035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4242764
 Amount of Each Receipt this Period
 250.00

C. Jessica Garber
 Full Name (Last, First, Middle Initial)
 Mailing Address 2111 Jefferson Davis Hwy #203s
 City State Zip Code
 Arlington VA 22202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United States Senate Staff Assistant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232468
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 572 OF 2648
	<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)
EMILY's List

A. Ms. Carla Garbin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4710 Bay Street NE #112
 City St Petersburg State FL Zip Code 33703
 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 ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238561
 Amount of Each Receipt this Period
 100.00

B. Danna Garcia
 Full Name (Last, First, Middle Initial)
 Mailing Address 4106 Tyler Street
 City Amarillo State TX Zip Code 79110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cal Farley's Occupation Donor Services Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237910
 Amount of Each Receipt this Period
 15.00

C. Danna Garcia
 Full Name (Last, First, Middle Initial)
 Mailing Address 4106 Tyler Street
 City Amarillo State TX Zip Code 79110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cal Farley's Occupation Donor Services Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229590
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 573 OF 2648
	<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)
EMILY's List

A. Danna Garcia
Full Name (Last, First, Middle Initial)
Mailing Address 4106 Tyler Street
City Amarillo State TX Zip Code 79110
FEC ID number of contributing federal political committee. **C**
Name of Employer Cal Farley's Occupation Donor Services Representative
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241293
Amount of Each Receipt this Period
25.00

B. Celinda Gardne
Full Name (Last, First, Middle Initial)
Mailing Address 9246 Saltwater Way
City Jacksonville State FL Zip Code 32256
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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4239850
Amount of Each Receipt this Period
25.00

C. Dianne Gardner
Full Name (Last, First, Middle Initial)
Mailing Address 13725 Mar Scenic Dr.
City Del Mar State CA Zip Code 92014
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Psychologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 01 / 2014
Transaction ID : 4231015
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 574 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Mona J Gardner		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234542
Mailing Address 9801 Emerald Links Dr.		Amount of Each Receipt this Period 960.00
City Dallas	State FL	Zip Code 33626
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 ▼ 960.00	

Full Name (Last, First, Middle Initial) B. Dr. Mona J Gardner		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4231965
Mailing Address 9801 Emerald Links Dr.		Amount of Each Receipt this Period 50.00
City Dallas	State FL	Zip Code 33626
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 ▼ 960.00	

Full Name (Last, First, Middle Initial) C. Dr. Mona J Gardner		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014 Transaction ID : 4236044
Mailing Address 9801 Emerald Links Dr.		Amount of Each Receipt this Period 50.00
City Dallas	State FL	Zip Code 33626
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 ▼ 960.00	

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 575 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jeanne Gardner		Date of Receipt
Mailing Address 125 Westchester Dr		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Los Gatos	CA	95032
FEC ID number of contributing federal political committee.		Transaction ID : 4228774
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jeanne Gardner		Date of Receipt
Mailing Address 125 Westchester Dr		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Los Gatos	CA	95032
FEC ID number of contributing federal political committee.		Transaction ID : 4242043
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ingunn Gardner		Date of Receipt
Mailing Address 99 Bonney Shores		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Meredith	NH	03253
FEC ID number of contributing federal political committee.		Transaction ID : 4231748
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="35.00"/>
Name of Employer	Occupation	
Winnepesaukee Flagship Corp.	Tourism	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="570.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="85.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 576 OF 2648
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ingunn Gardner		Date of Receipt
Mailing Address 99 Bonney Shores		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Meredith	State NH	Zip Code 03253
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4229831
Name of Employer Winnepesaukee Flagship Corp.		Amount of Each Receipt this Period
Occupation Tourism		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="570.00"/>	

Full Name (Last, First, Middle Initial) B. Ingunn Gardner		Date of Receipt
Mailing Address 99 Bonney Shores		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Meredith	State NH	Zip Code 03253
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4240832
Name of Employer Winnepesaukee Flagship Corp.		Amount of Each Receipt this Period
Occupation Tourism		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="570.00"/>	

Full Name (Last, First, Middle Initial) C. Kay Gardner Pyle		Date of Receipt
Mailing Address 32120 SW Boones Bend Rd		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City Wilsonville	State OR	Zip Code 97070
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4239851
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="225.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="125.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 577 OF 2648
	<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)
EMILY's List

A. Marie Garescher
Full Name (Last, First, Middle Initial)

Mailing Address 96 Main Street

City Tarrytown State NY Zip Code 10591

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

Name of Employer Penoles Metals & Chemicals Occupation Traffic Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 23 / 2014
Transaction ID : 4239852

Amount of Each Receipt this Period 25.00

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

Mailing Address PO Box 416

City Smith River State CA Zip Code 95567

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

Name of Employer None Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4231810

Amount of Each Receipt this Period 25.00

C. Ms. Rita Garretson
Full Name (Last, First, Middle Initial)

Mailing Address 363 Wildwood Drive

City Rochester State NY Zip Code 14616

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

Name of Employer Empire Justice Center Occupation Director, Not For Profit Community Coa

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 23 / 2014
Transaction ID : 4239853

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 578 OF 2648
	<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	

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)
EMILY's List

A. Ms. Jane N. Garrett
Full Name (Last, First, Middle Initial)
Mailing Address 43 Deer Meadow Drive
City Middlebury State VT Zip Code 05753
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 ▼ 700.00

Date of Receipt 11 / 26 / 2014
Transaction ID : 4227685
Amount of Each Receipt this Period 100.00

B. Ms. Connie Garrison
Full Name (Last, First, Middle Initial)
Mailing Address 1126 N. Holliston Ave.
City Pasadena State CA Zip Code 91104
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Housewife
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 28 / 2014
Transaction ID : 4228777
Amount of Each Receipt this Period 25.00

C. Ms. Connie Garrison
Full Name (Last, First, Middle Initial)
Mailing Address 1126 N. Holliston Ave.
City Pasadena State CA Zip Code 91104
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Housewife
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 28 / 2014
Transaction ID : 4242045
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 579 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jeffrey Garrison
Full Name (Last, First, Middle Initial)

Mailing Address 921 Autumn Lane
Unit #239

City Bellingham State WA Zip Code 98229

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 ▼
208.76

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233513

Amount of Each Receipt this Period
5.00

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

Mailing Address 921 Autumn Lane
Unit #239

City Bellingham State WA Zip Code 98229

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 ▼
208.76

Date of Receipt
12 / 20 / 2014
Transaction ID : 4239144

Amount of Each Receipt this Period
5.00

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

Mailing Address 921 Autumn Lane
Unit #239

City Bellingham State WA Zip Code 98229

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 ▼
208.76

Date of Receipt
11 / 28 / 2014
Transaction ID : 4228776

Amount of Each Receipt this Period
9.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 19.00

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 580 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Jeffrey Garrison

Mailing Address 921 Autumn Lane
Unit #239

City Bellingham State WA Zip Code 98229

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 ▼
208.76

Date of Receipt
12 / 28 / 2014
Transaction ID : 4242044

Amount of Each Receipt this Period
9.00

Full Name (Last, First, Middle Initial)
B. Ms. Valerie Garry

Mailing Address 525 Valle Vista Ave.

City Oakland State CA Zip Code 94610

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

Name of Employer N/A Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
12 / 18 / 2014
Transaction ID : 4244868

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Ms. Karen Garst

Mailing Address 26340 SW Grahams Ferry Rd

City Sherwood State OR Zip Code 97140

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236517

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 104.00

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 581 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Cecilia Gaston
 Full Name (Last, First, Middle Initial)
 Mailing Address 1831 Madison Ave
 City State Zip Code
 New York NY 10035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Violence Intervention Program Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 590.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228779
 Amount of Each Receipt this Period
 25.00

B. Ms. Cecilia Gaston
 Full Name (Last, First, Middle Initial)
 Mailing Address 1831 Madison Ave
 City State Zip Code
 New York NY 10035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Violence Intervention Program Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 590.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242047
 Amount of Each Receipt this Period
 25.00

C. Ms. Susan P. Gato
 Full Name (Last, First, Middle Initial)
 Mailing Address 46 Margaret Ct.
 City State Zip Code
 Toms River NJ 08753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Registered Nurse
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239856
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 582 OF 2648
	<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)
EMILY's List

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

Mailing Address 11207 Caisson Court

City Woodbridge State VA Zip Code 22192

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

Name of Employer Centra Technolgy, Inc. Occupation Intelligence Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231738

Amount of Each Receipt this Period
10.00

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

Mailing Address 11207 Caisson Court

City Woodbridge State VA Zip Code 22192

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

Name of Employer Centra Technolgy, Inc. Occupation Intelligence Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233674

Amount of Each Receipt this Period
25.00

C. Ms. Holly W. Gauthier
Full Name (Last, First, Middle Initial)

Mailing Address 224 Warwick Ave.

City South Orange State NJ Zip Code 07079

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
12 / 16 / 2014
Transaction ID : 4237012

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **285.00**

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 583 OF 2648
	<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)
EMILY's List

A. Gill Gautreau
Full Name (Last, First, Middle Initial)
Mailing Address 605 East Blvd.
City Baton Rouge State LA Zip Code 70802
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 ▼ 216.00

Date of Receipt
12 / 16 / 2014
Transaction ID : 4244853
Amount of Each Receipt this Period
15.00

B. Cheri Gavin
Full Name (Last, First, Middle Initial)
Mailing Address 9135 S. Linder Road
City Meridian State ID Zip Code 83642
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 410.00

Date of Receipt
11 / 30 / 2014
Transaction ID : 4229647
Amount of Each Receipt this Period
50.00

c. Ms. Kathleen Gavin
Full Name (Last, First, Middle Initial)
Mailing Address 2 Bunker Blvd
City Palmyra State VA Zip Code 22963
FEC ID number of contributing federal political committee. **C**
Name of Employer University Of Virginia Occupation Rn
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 295.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236516
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 584 OF 2648
	<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)
EMILY's List

A. Ms. Alana Gazetski
Full Name (Last, First, Middle Initial)
Mailing Address 57-2 Revere Rd.
City Drexel Hill State PA Zip Code 19026
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4226722
Amount of Each Receipt this Period
50.00

B. J. Geary
Full Name (Last, First, Middle Initial)
Mailing Address 7 Ipswich Rd.
City Newton State MA Zip Code 02461
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4227429
Amount of Each Receipt this Period
100.00

C. Ms. Leslie A. Geballe
Full Name (Last, First, Middle Initial)
Mailing Address 6607 Shoal Creek Blvd.
City Austin State TX Zip Code 78757
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 08 / 2014
Transaction ID : 4233275
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 585 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Maria Geczy		Date of Receipt
Mailing Address 601 Van Ness, #242		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
San Francisco	CA	94102
FEC ID number of contributing federal political committee.		Transaction ID : 4228780
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="395.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Maria Geczy		Date of Receipt
Mailing Address 601 Van Ness, #242		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
San Francisco	CA	94102
FEC ID number of contributing federal political committee.		Transaction ID : 4241454
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="395.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Anne K. Geeding		Date of Receipt
Mailing Address 12583 Alcacer Del Sol		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
San Diego	CA	92128
FEC ID number of contributing federal political committee.		Transaction ID : 4235422
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer	Occupation	
Self Employed	Social Worker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="520.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="65.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 586 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Judith Geer

Mailing Address 198 Canada St.

City Holland	State NY	Zip Code 14080
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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 ▼
235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230453

Amount of Each Receipt this Period
50.00

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

Mailing Address 7293 E Caminito Feliz

City Tucson	State AZ	Zip Code 85710
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FEC ID number of contributing federal political committee. **C**

Name of Employer University Of Arizona	Occupation Mktg Communications
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228781

Amount of Each Receipt this Period
25.00

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

Mailing Address 7293 E Caminito Feliz

City Tucson	State AZ	Zip Code 85710
----------------	-------------	-------------------

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

Name of Employer University Of Arizona	Occupation Mktg Communications
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241376

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 587 OF 2648
	<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)
EMILY's List

A. Virginia Geib
Full Name (Last, First, Middle Initial)

Mailing Address 7293 E Caminito Feliz

City Tucson State AZ Zip Code 85710

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

Name of Employer University Of Arizona Occupation Mktg Communications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1405.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4239858

Amount of Each Receipt this Period
35.00

B. Mr. James R. Geiser
Full Name (Last, First, Middle Initial)

Mailing Address 6 Spies Road

City New Paltz State NY Zip Code 12561

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2014

Transaction ID : 4231819

Amount of Each Receipt this Period
20.00

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

Mailing Address 2559 35th St Apt 2r

City Astoria State NY Zip Code 11103

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

Name of Employer Self Employed Occupation Urban Historian

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 10 / 2014

Transaction ID : 4234560

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... **70.00**

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 588 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Stephen A. Geller
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 N. Swall Drive #301
 City Beverly Hills State CA Zip Code 90211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Pathologist, Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236156
 Amount of Each Receipt this Period
 35.00

B. Mrs. Beverly P. Gelwick
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Prosser Road
 City Harpswell State ME Zip Code 04079
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231017
 Amount of Each Receipt this Period
 75.00

C. Karen Gentry
 Full Name (Last, First, Middle Initial)
 Mailing Address 2817 Harris Blvd
 City Austin State TX Zip Code 78703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229740
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 589 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Karen Gentry		Date of Receipt M M / D D / Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240478
Mailing Address 2817 Harris Blvd		Amount of Each Receipt this Period 10.00
City Austin	State TX	Zip Code 78703
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Mrs. H. Becki Gentry		Date of Receipt M M / D D / Y Y Y Y Y 12 / 04 / 2014 Transaction ID : 4232186
Mailing Address 5 Cimorelli DR		Amount of Each Receipt this Period 150.00
City New Windsor	State NY	Zip Code 12553
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dr. Alida Geppert		Date of Receipt M M / D D / Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4231018
Mailing Address 1545 Summer Ridge Dr		Amount of Each Receipt this Period 125.00
City Kalamazoo	State MI	Zip Code 49009
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 ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 590 OF 2648
	<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)
EMILY's List

A. Ms. Linda A. Gerard
Full Name (Last, First, Middle Initial)
Mailing Address 3 Deer Haven Ln
City White Hall State MD Zip Code 21161
FEC ID number of contributing federal political committee. **C**
Name of Employer Polystyrene Products Co., Inc. Occupation Admin. Asst.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1085.00

Date of Receipt 12 / 30 / 2014
Transaction ID : 4242931
Amount of Each Receipt this Period 15.00

B. Ms. Ana Gerena
Full Name (Last, First, Middle Initial)
Mailing Address 11091 Springfield Place
City Hollywood State FL Zip Code 33026
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 ▼ 283.00

Date of Receipt 12 / 01 / 2014
Transaction ID : 4231019
Amount of Each Receipt this Period 53.00

C. Ms. Marianne Z. Gerhart
Full Name (Last, First, Middle Initial)
Mailing Address 2395 Oak St
City Berkeley State CA Zip Code 94708
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1525.00

Date of Receipt 11 / 26 / 2014
Transaction ID : 4227647
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 568.00
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 591 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Delores Gerlach		Date of Receipt
Mailing Address 1406 Dorothea Rd		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4239391
Berkley	MI	Amount of Each Receipt this Period
Zip Code		<input type="text" value="20.00"/>
48072		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Requested	Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Theresa J. Germaine		Date of Receipt
Mailing Address 382 Central Park West #14J		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4237747
New York	NY	Amount of Each Receipt this Period
Zip Code		<input type="text" value="20.00"/>
10025		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Russell Gershman		Date of Receipt
Mailing Address 70 Bedford Rd.		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4240325
Lincoln	MA	Amount of Each Receipt this Period
Zip Code		<input type="text" value="150.00"/>
01773		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1100.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="190.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 592 OF 2648
	<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)
EMILY's List

A. Ms. Jeanne K. Gerson
Full Name (Last, First, Middle Initial)
Mailing Address 333 N Palm DR Apt 105

City Beverly Hills	State CA	Zip Code 90210
-----------------------	-------------	-------------------

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

Name of Employer Vist Del Mar	Occupation Administration Assistant
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	26	/	2014

Transaction ID : 4227791

Amount of Each Receipt this Period

200.00

B. Manette Gerstle
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1166

City Arcata	State CA	Zip Code 95518
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	09	/	2014

Transaction ID : 4234258

Amount of Each Receipt this Period

25.00

C. Ms. Beverly J. Gerzevske
Full Name (Last, First, Middle Initial)
Mailing Address 1100 Fox Hill Pl. SW

City Rochester	State MN	Zip Code 55902
-------------------	-------------	-------------------

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 ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4231455

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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 593 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Helen Giambruni

Mailing Address 1950 Clay St, Apt. 302

City San Francisco State CA Zip Code 94109

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **775.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230460

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Ms. Kathleen Giancarlo

Mailing Address 7600 Grand Marais St

City Grosse Pointe Park State MI Zip Code 48230

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

Name of Employer Ogp Occupation Property Investor/Managem

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
 12 / 23 / 2014
Transaction ID : 4240291

Amount of Each Receipt this Period
150.00

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

Mailing Address 3242 Cummins Way

City Missoula State MT Zip Code 59802

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

Name of Employer Campaign Compliance, Inc. 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
 12 / 10 / 2014
Transaction ID : 4234490

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **230.00**

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 594 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Elizabeth Gibbs
 Full Name (Last, First, Middle Initial)
 Mailing Address 9703 NE 130th Place
 City Kirkland State WA Zip Code 98034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227905
 Amount of Each Receipt this Period
 35.00

B. Ms. Elizabeth Gibbs
 Full Name (Last, First, Middle Initial)
 Mailing Address 9703 NE 130th Place
 City Kirkland State WA Zip Code 98034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240815
 Amount of Each Receipt this Period
 35.00

C. Mr. Charles Gibson
 Full Name (Last, First, Middle Initial)
 Mailing Address 414 Appleton Dr.
 City Clarksville State TN Zip Code 37042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 08 / 2014
Transaction ID : 4233042
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
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 595 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Frankie A. Gibson
 Full Name (Last, First, Middle Initial)
 Mailing Address 9989 Oakton Terrace Road
 City State Zip Code
 Oakton VA 22124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231766
 Amount of Each Receipt this Period
 200.00

B. Ms. Janet Giese
 Full Name (Last, First, Middle Initial)
 Mailing Address 18735 Sierra Vista Road
 City State Zip Code
 Monument CO 80920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Chaseland Services, Inc. President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231844
 Amount of Each Receipt this Period
 35.00

C. Hon. Kay A. Giese
 Full Name (Last, First, Middle Initial)
 Mailing Address 157 Gibbons Place
 City State Zip Code
 Athens GA 30605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238565
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	305.00
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 596 OF 2648
	<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)
EMILY's List

A. Ms. Ethel S. Gilbert
Full Name (Last, First, Middle Initial)
Mailing Address 6 Clemson Ct.
City Rockville State MD Zip Code 20850
FEC ID number of contributing federal political committee. **C**
Name of Employer Nih Occupation Biostatistician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **800.00**

Date of Receipt **11 / 26 / 2014**
Transaction ID : 4227702
Amount of Each Receipt this Period **200.00**

B. Mr. Edes P. Gilbert
Full Name (Last, First, Middle Initial)
Mailing Address 710 S Hanley Rd Apt 16a
City Saint Louis State MO Zip Code 63105
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1100.00**

Date of Receipt **12 / 01 / 2014**
Transaction ID : 4230463
Amount of Each Receipt this Period **250.00**

C. Ms. Sibyll Gilbert
Full Name (Last, First, Middle Initial)
Mailing Address 41 Game Farm Road
City Pawling State NY Zip Code 12564
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 **350.00**

Date of Receipt **12 / 02 / 2014**
Transaction ID : 4231020
Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... **500.00**
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 597 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Miss Nancy Gilbert		Date of Receipt
Mailing Address PO Box 1470		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City State Zip Code Jamesport NY 11947		Transaction ID : 4230464
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="300.00"/>
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Lucia A. Gilbert		Date of Receipt
Mailing Address 1549 Rosecrest Terrace		<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City State Zip Code San Jose CA 95126		Transaction ID : 4237981
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 Santa Clara University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2475.00"/>	

Full Name (Last, First, Middle Initial) C. Edmund Gilday		Date of Receipt
Mailing Address 14081 Hwy 6 E		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City State Zip Code Grinnell IA 50112		Transaction ID : 4237297
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="35.00"/>
Name of Employer Grinnell College	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="360.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="585.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 598 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Jay Gilden		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230465
Mailing Address 4232 Childress		Amount of Each Receipt this Period 15.00
City Houston	State TX	Zip Code 77005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 315.00
Name of Employer Self	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) B. Mr. Jay Gilden		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234494
Mailing Address 4232 Childress		Amount of Each Receipt this Period 15.00
City Houston	State TX	Zip Code 77005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 315.00
Name of Employer Self	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) C. Ms. Margaret G. Gill		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233306
Mailing Address 32 Flood Cir.		Amount of Each Receipt this Period 100.00
City Atherton	State CA	Zip Code 94027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer REQUESTED	Occupation Philanthropist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 599 OF 2648
	<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

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)
EMILY's List

A. Ms. Lorna Gill
Full Name (Last, First, Middle Initial)
Mailing Address 1172 Oakmont Pl.
City Nipomo State CA Zip Code 93444
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt **12 / 01 / 2014**
Transaction ID : 4230467
Amount of Each Receipt this Period **200.00**

B. Ms. Rose Marie Gillikin
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 9628
City Chapel Hill State NC Zip Code 27515
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Previously Teacher
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1258.00**

Date of Receipt **12 / 05 / 2014**
Transaction ID : 4232645
Amount of Each Receipt this Period **84.00**

C. Ms. Janet C Gillilan
Full Name (Last, First, Middle Initial)
Mailing Address 960 Legrand Street
City Salt Lake City State UT Zip Code 84108
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **255.00**

Date of Receipt **11 / 28 / 2014**
Transaction ID : 4228785
Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **294.00**
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 600 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet C Gillilan		Date of Receipt
Mailing Address 960 Legrand Street		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Salt Lake City	UT	84108
FEC ID number of contributing federal political committee.		Transaction ID : 4241455
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="255.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Helen Gillotte-Tropp		Date of Receipt
Mailing Address 37 Canyon Road		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Berkeley	CA	94704
FEC ID number of contributing federal political committee.		Transaction ID : 4228786
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Helen Gillotte-Tropp		Date of Receipt
Mailing Address 37 Canyon Road		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Berkeley	CA	94704
FEC ID number of contributing federal political committee.		Transaction ID : 4242049
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="110.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 601 OF 2648
<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)
EMILY's List

A. Dr. Priscilla A. Gilman
Full Name (Last, First, Middle Initial)

Mailing Address 4537 Deer Run

City Evans State GA Zip Code 30809

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 ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014

Transaction ID : 4231999

Amount of Each Receipt this Period
 100.00

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

Mailing Address 317 Solano Dr SE

City Albuquerque State NM Zip Code 87108

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

Name of Employer None Occupation None

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
 12 / 18 / 2014

Transaction ID : 4238122

Amount of Each Receipt this Period
 100.00

c. Mr. Randall J. Gingiss
Full Name (Last, First, Middle Initial)

Mailing Address 1035 Valley View Drive

City Vermillion State SD Zip Code 57069

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

Name of Employer University of South Dakota Occupation PROFESSOR OF LAW

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : 4230468

Amount of Each Receipt this Period
 1200.00

SUBTOTAL of Receipts This Page (optional).....▶	1400.00
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 602 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara A. Giolitto		Date of Receipt
Mailing Address 807 Brae Burn Lane		M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014
City	State	Zip Code
Rockord	IL	61107
FEC ID number of contributing federal political committee.		Transaction ID : 4231642
Name of Employer		Amount of Each Receipt this Period
Self	Occupation	25.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	350.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Ilene K. Gipson		Date of Receipt
Mailing Address 128 Heaths Bridge Road		M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2014
City	State	Zip Code
Concord	MA	01742
FEC ID number of contributing federal political committee.		Transaction ID : 4238352
Name of Employer		Amount of Each Receipt this Period
Schepens Eye Reserch Institute	Occupation	250.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	450.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Claudia M. Giuliani		Date of Receipt
Mailing Address 167 Oakdale Ave		M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014
City	State	Zip Code
Mill Valley	CA	94941
FEC ID number of contributing federal political committee.		Transaction ID : 4235120
Name of Employer		Amount of Each Receipt this Period
None	Occupation	100.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	600.00	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 603 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ellen Givins		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228788
Mailing Address PO Box 911		Amount of Each Receipt this Period 50.00
City Arcata	State CA	Zip Code 95518
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation Retired		Aggregate Year-to-Date ▼ 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ellen Givins		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242051
Mailing Address PO Box 911		Amount of Each Receipt this Period 50.00
City Arcata	State CA	Zip Code 95518
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation Retired		Aggregate Year-to-Date ▼ 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Leona Gizzi		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4244796
Mailing Address 47 Lafayette Pl		Amount of Each Receipt this Period 22.00
City Greenwich	State CT	Zip Code 06830
FEC ID number of contributing federal political committee. C	Name of Employer REQUESTED	
Occupation REQUESTED		Aggregate Year-to-Date ▼ 364.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	122.00
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 604 OF 2648
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Helen Gjerde
Full Name (Last, First, Middle Initial)
Mailing Address 12295 Woodside Dr.
City Saratoga State CA Zip Code 95070
FEC ID number of contributing federal political committee. **C**
Name of Employer H.M. Occupation Chemist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt **12 / 01 / 2014**
Transaction ID : 4230471
Amount of Each Receipt this Period **200.00**

B. Ingrid Gladics
Full Name (Last, First, Middle Initial)
Mailing Address 101 Lower Broadford Road
City Bellevue State ID Zip Code 83313
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **275.00**

Date of Receipt **12 / 28 / 2014**
Transaction ID : 4241456
Amount of Each Receipt this Period **50.00**

C. Ms. Estelle Glarborg
Full Name (Last, First, Middle Initial)
Mailing Address 2121 S Pantano Rd Unit 236
City Tucson State AZ Zip Code 85710
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **11 / 26 / 2014**
Transaction ID : 4227907
Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **275.00**
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 605 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Estelle Glarborg

Mailing Address 2121 S Pantano Rd Unit 236

City Tucson State AZ Zip Code 85710

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 ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240786

Amount of Each Receipt this Period
25.00

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

Mailing Address 309 Eastchester Dr

City Morehead City State NC Zip Code 28557

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228789

Amount of Each Receipt this Period
25.00

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

Mailing Address 309 Eastchester Dr

City Morehead City State NC Zip Code 28557

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4242052

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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 606 OF 2648
	<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)
EMILY's List

A. Mrs. Linda E. Glass
Full Name (Last, First, Middle Initial)
Mailing Address 85 Beecher Place

City Newton	State MA	Zip Code 02459
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FEC ID number of contributing federal political committee. **C**

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

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
12	/	23	/	2014

Transaction ID : 4239864

Amount of Each Receipt this Period
50.00

B. Ms. Susan J. Glass
Full Name (Last, First, Middle Initial)
Mailing Address 8 Mirador

City Irvine	State CA	Zip Code 92612
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Attorney
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	24	/	2014

Transaction ID : 4240278

Amount of Each Receipt this Period
1000.00

C. Dr. Eli Glatstein , M.D.
Full Name (Last, First, Middle Initial)
Mailing Address 220 W. Rittenhouse Sq.

City Philadelphia	State PA	Zip Code 19103
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FEC ID number of contributing federal political committee. **C**

Name of Employer U. Of Penn	Occupation Physician
--------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	14	/	2014

Transaction ID : 4235403

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	1060.00
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 607 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Eva Glazer
 Full Name (Last, First, Middle Initial)
 Mailing Address 135 Canon Drive
 City Orinda State CA Zip Code 94563
 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 ▼ 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227432
 Amount of Each Receipt this Period
 100.00

B. Virginia Glazer
 Full Name (Last, First, Middle Initial)
 Mailing Address 2625 Hillview Rd
 City Mounds View State MN Zip Code 55112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230166
 Amount of Each Receipt this Period
 50.00

C. Virginia Glazer
 Full Name (Last, First, Middle Initial)
 Mailing Address 2625 Hillview Rd
 City Mounds View State MN Zip Code 55112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240821
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 608 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Mimi C. Gleekel
 Full Name (Last, First, Middle Initial)
 Mailing Address 2667 Cedar Green
 City Minnetonka State MN Zip Code 55305
 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 ▼ 620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228379
 Amount of Each Receipt this Period
 35.00

B. Ms. Mimi C. Gleekel
 Full Name (Last, First, Middle Initial)
 Mailing Address 2667 Cedar Green
 City Minnetonka State MN Zip Code 55305
 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 ▼ 620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241196
 Amount of Each Receipt this Period
 35.00

C. Ms. Myra C. Glenn
 Full Name (Last, First, Middle Initial)
 Mailing Address 239 Berryman Dr.
 City Buffalo State NY Zip Code 14226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Elmira College Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230472
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 609 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. John S. Glenn
 Full Name (Last, First, Middle Initial)
 Mailing Address 214 N 17th Street
 City Fernandina Beach State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 11 / 27 / 2014
Transaction ID : 4228272
 Amount of Each Receipt this Period
 10.00

B. John S. Glenn
 Full Name (Last, First, Middle Initial)
 Mailing Address 214 N 17th Street
 City Fernandina Beach State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 20 / 2014
Transaction ID : 4239184
 Amount of Each Receipt this Period
 10.00

C. John S. Glenn
 Full Name (Last, First, Middle Initial)
 Mailing Address 214 N 17th Street
 City Fernandina Beach State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 27 / 2014
Transaction ID : 4241135
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 610 OF 2648
	<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)
EMILY's List

A. Mr. Bruce Gluckman
Full Name (Last, First, Middle Initial)

Mailing Address 21 Courtland Place

City Middletown State NY Zip Code 10940

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

Name of Employer Mediacom Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : 4238568

Amount of Each Receipt this Period
 35.00

B. Terry A. Glynn
Full Name (Last, First, Middle Initial)

Mailing Address 439 Edgewood Dr

City East Peoria State IL Zip Code 61611

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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4239866

Amount of Each Receipt this Period
 50.00

C. Mrs. James W. Goetz
Full Name (Last, First, Middle Initial)

Mailing Address 60 Sterling Place

City Brooklyn State NY Zip Code 11217

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 ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014

Transaction ID : 4227912

Amount of Each Receipt this Period
 5.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 611 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. James W. Goetz		Date of Receipt 12 / 26 / 2014 Transaction ID : 4240467
Mailing Address 60 Sterling Place		Amount of Each Receipt this Period 5.00
City Brooklyn	State NY	Zip Code 11217
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 290.00
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Bruce F. Goff		Date of Receipt 12 / 03 / 2014 Transaction ID : 4231641
Mailing Address 1538 10th Avenue		Amount of Each Receipt this Period 50.00
City San Diego	State CA	Zip Code 92101
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 600.00
Name of Employer Self Employed	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Daniel Golas		Date of Receipt 11 / 26 / 2014 Transaction ID : 4227640
Mailing Address 24925 Dunnivant Dr.		Amount of Each Receipt this Period 100.00
City Gaithersburg	State MD	Zip Code 20882
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 275.00
Name of Employer Nuclear Energy Institute	Occupation Sr Project Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	155.00
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 612 OF 2648
	<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	

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)
EMILY's List

A. Ms. Nancy Gold
Full Name (Last, First, Middle Initial)

Mailing Address 180 Route 100

City State Zip Code
Katonah NY 10536

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

Name of Employer Occupation
Self- The Gold Standard Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : 4234715

Amount of Each Receipt this Period
100.00

B. Ms. Lesley E. Goldberg
Full Name (Last, First, Middle Initial)

Mailing Address 822 Greenwich St.
Apt 2A

City State Zip Code
New York NY 10014

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

Name of Employer Occupation
Jpmorgan Chase Bank, N.A. Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3620.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2014

Transaction ID : 4229625

Amount of Each Receipt this Period
110.00

c. Ms. Lesley E. Goldberg
Full Name (Last, First, Middle Initial)

Mailing Address 822 Greenwich St.
Apt 2A

City State Zip Code
New York NY 10014

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

Name of Employer Occupation
Jpmorgan Chase Bank, N.A. Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3620.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014

Transaction ID : 4242055

Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 320.00

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 613 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lesley E. Goldberg			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228792		
Mailing Address 822 Greenwich St. Apt 2A					
City	State	Zip Code			
New York	NY	10014			
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 150.00		
Name of Employer Jpmorgan Chase Bank, N.A.		Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3620.00			

Full Name (Last, First, Middle Initial) B. Ms. Lesley E. Goldberg			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242056		
Mailing Address 822 Greenwich St. Apt 2A					
City	State	Zip Code			
New York	NY	10014			
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 150.00		
Name of Employer Jpmorgan Chase Bank, N.A.		Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3620.00			

Full Name (Last, First, Middle Initial) C. Ms. Nancy Goldberg			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237885		
Mailing Address 4040 Grand View Blvd #30					
City	State	Zip Code			
Los Angeles	CA	90066			
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 35.00		
Name of Employer None		Occupation None			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 610.00			

SUBTOTAL of Receipts This Page (optional).....▶	335.00
TOTAL This Period (last page this line number only).....▶	335.00

**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 614 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Alan Goldberg		Date of Receipt
Mailing Address 7925 Mandan Rd. Apt. 103		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City Greenbelt	State MD	Zip Code 20770
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4232210
Name of Employer Requested		Amount of Each Receipt this Period
Occupation Requested		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="500.00"/>		

Full Name (Last, First, Middle Initial) B. Ms. Lynne Gold-Bikin		Date of Receipt
Mailing Address 307 Hughes Road		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City King Of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4231913
Name of Employer Weber Gallagher Llp		Amount of Each Receipt this Period
Occupation Attorney		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="800.00"/>		

Full Name (Last, First, Middle Initial) C. Mrs. Joan Golding		Date of Receipt
Mailing Address 101 Piney Woods Ct., Apt. 117		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City Houston	State TX	Zip Code 77077
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4230478
Name of Employer Requested		Amount of Each Receipt this Period
Occupation Requested		<input type="text" value="300.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="700.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="550.00"/>
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: (check only one)	PAGE 615 OF 2648
	<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)
EMILY's List

A. Sandra Goldman
Full Name (Last, First, Middle Initial)
Mailing Address 4701 Broom Drive

City Olney	State MD	Zip Code 20832
---------------	-------------	-------------------

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

Name of Employer Department Of Defense	Occupation Analyst
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4229678

Amount of Each Receipt this Period
50.00

B. Sandra Goldman
Full Name (Last, First, Middle Initial)
Mailing Address 4701 Broom Drive

City Olney	State MD	Zip Code 20832
---------------	-------------	-------------------

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

Name of Employer Department Of Defense	Occupation Analyst
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241212

Amount of Each Receipt this Period
50.00

C. Ms. Susan Friess Goldman
Full Name (Last, First, Middle Initial)
Mailing Address 2601 Henry Hudson Pwy

City Bronx	State NY	Zip Code 10463
---------------	-------------	-------------------

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

Name of Employer Love Me Tender School	Occupation Admin.
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	14	/	2014

Transaction ID : 4235436

Amount of Each Receipt this Period
18.00

SUBTOTAL of Receipts This Page (optional).....	▶	118.00
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 616 OF 2648
	<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)
EMILY's List

A. Ms. Deborah Goldsmith
Full Name (Last, First, Middle Initial)
Mailing Address 4106 Galt St.
City San Diego State CA Zip Code 92117
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 920.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014
Transaction ID : 4243219
Amount of Each Receipt this Period
100.00

B. Mrs. Joanne T. Goldsmith
Full Name (Last, First, Middle Initial)
Mailing Address 9911 Middle Mill Drive
City Owings Mills State MD Zip Code 21117
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : 4232701
Amount of Each Receipt this Period
18.00

C. Ms. Lynne Goldstein
Full Name (Last, First, Middle Initial)
Mailing Address 3931 Binghampton Dr
City Okemos State MI Zip Code 48864
FEC ID number of contributing federal political committee. **C**
Name of Employer Michigan State University Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 535.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2014
Transaction ID : 4233446
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	128.00
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 617 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Lynne Goldstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 3931 Binghamton Dr
 City Okemos State MI Zip Code 48864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Michigan State University Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4243045
 Amount of Each Receipt this Period
 25.00

B. Ms. Lynne Goldstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 3931 Binghamton Dr
 City Okemos State MI Zip Code 48864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Michigan State University Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4230216
 Amount of Each Receipt this Period
 40.00

C. Ms. Lynne Goldstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 3931 Binghamton Dr
 City Okemos State MI Zip Code 48864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Michigan State University Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4244935
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
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 618 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Sharon Goldstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 7111 Lakehurst Ave
 City State Zip Code
 Dallas TX 75230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4233937
 Amount of Each Receipt this Period
 75.00

B. Ms. Barbara Golumb
 Full Name (Last, First, Middle Initial)
 Mailing Address 1422 10th Ave.
 City State Zip Code
 San Francisco CA 94122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232339
 Amount of Each Receipt this Period
 200.00

C. Mr. Albert Gonzales
 Full Name (Last, First, Middle Initial)
 Mailing Address 2702 Gustavus St
 City State Zip Code
 Laredo TX 78043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232430
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 305.00
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 619 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Kathleen Gooding

Mailing Address PO Box 1690

City State Zip Code
Shelter Island NY 11964

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 ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227914

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Ms. Janice A. Goodman

Mailing Address 1333 Stockton Court

City State Zip Code
Indianapolis IN 46260

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239868

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Mr. Richard E. Goodman

Mailing Address 8110 Dougan Circle

City State Zip Code
Lincoln NE 68516

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

Name of Employer Occupation
University Of Nebraska Lincoln Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228794

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 620 OF 2648
	<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)
EMILY's List

A. Mr. Richard E. Goodman
Full Name (Last, First, Middle Initial)

Mailing Address 8110 Dougan Circle

City Lincoln State NE Zip Code 68516

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

Name of Employer University Of Nebraska Lincoln Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4241647

Amount of Each Receipt this Period
 15.00

B. Sandra Naylor Goodwin
Full Name (Last, First, Middle Initial)

Mailing Address 2130 Hidden Gold Trl

City Applegate State CA Zip Code 95703

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

Name of Employer Cibhs Occupation Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014

Transaction ID : 4233679

Amount of Each Receipt this Period
 25.00

C. Ms. Phoebe J. Goodwin
Full Name (Last, First, Middle Initial)

Mailing Address 695 N Gray Ave

City Fayetteville State AR Zip Code 72701

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014

Transaction ID : 4236013

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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 621 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Walter Gordon
 Full Name (Last, First, Middle Initial)
 Mailing Address 56 N. Main Street
 City Fall River State MA Zip Code 02720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236264
 Amount of Each Receipt this Period
 20.00

B. Ms. Marie A. Gordon
 Full Name (Last, First, Middle Initial)
 Mailing Address 887 Brae Ct. NE
 City Palm Bay State FL Zip Code 32905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 299.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4226732
 Amount of Each Receipt this Period
 20.00

C. Ms. Marie A. Gordon
 Full Name (Last, First, Middle Initial)
 Mailing Address 887 Brae Ct. NE
 City Palm Bay State FL Zip Code 32905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 299.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233169
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 622 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susanna Gordon		Date of Receipt
Mailing Address 1496 Trestle Glen Rd		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
Oakland	CA	94610
FEC ID number of contributing federal political committee.		Transaction ID : 4239291
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
Sandia National Labs	Manager	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jerry Gerald Gordon		Date of Receipt
Mailing Address 107 Fontaine Court		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Monroe	NJ	08831
FEC ID number of contributing federal political committee.		Transaction ID : 4228796
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Self	Semi-Retired Attorney	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jerry Gerald Gordon		Date of Receipt
Mailing Address 107 Fontaine Court		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Monroe	NJ	08831
FEC ID number of contributing federal political committee.		Transaction ID : 4242059
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Self	Semi-Retired Attorney	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="120.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 623 OF 2648
	<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)
EMILY's List

A. Katherine Gordon
Full Name (Last, First, Middle Initial)

Mailing Address 1441 Q St NW

City Washington State DC Zip Code 20009

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

Name of Employer Trust For The National Mall Occupation Fundraiser

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014

Transaction ID : 4240887

Amount of Each Receipt this Period
 50.00

B. Dr. Sally W. Goshorn
Full Name (Last, First, Middle Initial)

Mailing Address 4588 Lake Grove Rd

City Petoskey State MI Zip Code 49770

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014

Transaction ID : 4236266

Amount of Each Receipt this Period
 20.00

C. Ms. Margot Gotoff
Full Name (Last, First, Middle Initial)

Mailing Address 340 Thrall Street

City Cincinnati State OH Zip Code 45220

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

Name of Employer Self-Employed Occupation Sculptor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014

Transaction ID : 4228268

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00

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 624 OF 2648
	<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)
EMILY's List

A. Ms. Margot Gotoff
Full Name (Last, First, Middle Initial)

Mailing Address 340 Thrall Street

City Cincinnati State OH Zip Code 45220

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

Name of Employer Self-Employed Occupation Sculptor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
12 / 27 / 2014
Transaction ID : 4241131

Amount of Each Receipt this Period
10.00

B. Ms. Lisa S. Gottesman
Full Name (Last, First, Middle Initial)

Mailing Address 1 E Shore Rd

City Mountain Lakes State NJ Zip Code 07046

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

Name of Employer None Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
11 / 28 / 2014
Transaction ID : 4228800

Amount of Each Receipt this Period
25.00

c. Ms. Lisa S. Gottesman
Full Name (Last, First, Middle Initial)

Mailing Address 1 E Shore Rd

City Mountain Lakes State NJ Zip Code 07046

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

Name of Employer None Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4241458

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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 625 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jane Gottesman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 27 / 2014 Transaction ID : 4228384
Mailing Address 1518 Hawthorne Terrace		Amount of Each Receipt this Period 50.00
City Berkeley	State CA	Zip Code 94708
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Ms. Jane Gottesman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2014 Transaction ID : 4240945
Mailing Address 1518 Hawthorne Terrace		Amount of Each Receipt this Period 50.00
City Berkeley	State CA	Zip Code 94708
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Paige Gottlieb		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228801
Mailing Address 1845 Alfresco Pl		Amount of Each Receipt this Period 20.00
City Louisville	State KY	Zip Code 40205
FEC ID number of contributing federal political committee. C		
Name of Employer Appriss	Occupation Computer Programmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 626 OF 2648
	<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)
EMILY's List

A. Paige Gottlieb
Full Name (Last, First, Middle Initial)

Mailing Address 1845 Alfresco Pl

City Louisville State KY Zip Code 40205

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

Name of Employer Appriss Occupation Computer Programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241267

Amount of Each Receipt this Period
 200.00

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

Mailing Address 3241 Woodbine Street

City Los Angeles State CA Zip Code 90064

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

Name of Employer Manatt, Phelps & Phillips, Llp Occupation Legal Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231751

Amount of Each Receipt this Period
 50.00

c. Ms. Margery A. Gould
Full Name (Last, First, Middle Initial)

Mailing Address 5671 Spreading Oak Drive

City Los Angeles State CA Zip Code 90068

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 735.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4233850

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00

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 627 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Marian Gould

Mailing Address PO Box 6055

City Carmel By The Sea State CA Zip Code 93921

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234027

Amount of Each Receipt this Period
 35.00

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

Mailing Address 241 Sackett St

City Brooklyn State NY Zip Code 11231

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 ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233400

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Ms. Carol Gown

Mailing Address 2637 11th Ave E

City Seattle State WA Zip Code 98102

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227460

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00

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 628 OF 2648
	<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)
EMILY's List

A. Ms. Eden Graber
Full Name (Last, First, Middle Initial)
Mailing Address 2112 Baileys Corner Road
City Wall Township State NJ Zip Code 07719
FEC ID number of contributing federal political committee. **C**
Name of Employer The Wistar Institute Occupation Vp Development & Marketing- Science In
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4231746
Amount of Each Receipt this Period 15.00

B. Ms. Karen Graflage
Full Name (Last, First, Middle Initial)
Mailing Address 4961 Laclede Avenue Apt. 502
City Saint Louis State MO Zip Code 63108
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4230154
Amount of Each Receipt this Period 20.00

C. Ms. Karen Graflage
Full Name (Last, First, Middle Initial)
Mailing Address 4961 Laclede Avenue Apt. 502
City Saint Louis State MO Zip Code 63108
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 23 / 2014
Transaction ID : 4239869
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 629 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Karen Graflage

Mailing Address 4961 Laclede Avenue Apt. 502

City Saint Louis	State MO	Zip Code 63108
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232679

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. Ms. Nancy L. Graham

Mailing Address 1131 Garfield Street

City Denver	State CO	Zip Code 80206
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233335

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Ms. Nancy L. Graham

Mailing Address 1131 Garfield Street

City Denver	State CO	Zip Code 80206
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236743

Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 630 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy A. Graham		Date of Receipt
Mailing Address 24096 Deep Neck RD Po Box 87		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4231025
Royal Oak	MD	Amount of Each Receipt this Period
Zip Code		<input type="text" value="75.00"/>
21662		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Kenneth Graham		Date of Receipt
Mailing Address 155 Butternut Ln.		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4227498
Stratford	CT	Amount of Each Receipt this Period
Zip Code		<input type="text" value="25.00"/>
06614		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="325.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Bobbee J. Graham		Date of Receipt
Mailing Address 1203 N. Market St.		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4238314
North Manchester	IN	Amount of Each Receipt this Period
Zip Code		<input type="text" value="25.00"/>
46962		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="385.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="125.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 631 OF 2648
	(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)
EMILY's List

A. Elaine Graham
Full Name (Last, First, Middle Initial)
Mailing Address 2216 39th St. W.
City Bradenton State FL Zip Code 34205
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 ▼ 600.00

Date of Receipt
12 / 06 / 2014
Transaction ID : 4232457
Amount of Each Receipt this Period
25.00

B. Elaine Graham
Full Name (Last, First, Middle Initial)
Mailing Address 2216 39th St. W.
City Bradenton State FL Zip Code 34205
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 ▼ 600.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233462
Amount of Each Receipt this Period
25.00

C. Ms. Rosalyn Graham
Full Name (Last, First, Middle Initial)
Mailing Address 81 Ticonderoga Road
City Shelburne State VT Zip Code 05482
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232329
Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 632 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan Graham		Date of Receipt
Mailing Address 5023 18th Avenue NE		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Seattle	WA	98105
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4230481
Name of Employer	Occupation	Amount of Each Receipt this Period
University of Washington	TEACHER	<input type="text" value="125.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. Malcolm Gran		Date of Receipt
Mailing Address 8303 Newbold Lane		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Glenside	PA	19038
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4230096
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) C. Malcolm Gran		Date of Receipt
Mailing Address 8303 Newbold Lane		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
Glenside	PA	19038
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4239870
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="165.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 633 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Cynthia Grange

Mailing Address 1919 Duke St

City Edwardsville State IL Zip Code 62025

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

Name of Employer Southern Illinois University Edwardsvi Occupation Support Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014

Transaction ID : 4232761

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Jane N. Granitzki

Mailing Address 2500 Fox RD

City Fallston State MD Zip Code 21047

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

Name of Employer Requested Occupation Requested

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
12 / 11 / 2014

Transaction ID : 4234811

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Ms. Kathleen Grant

Mailing Address 8226 E. Upriver Dr

City Spokane State WA Zip Code 99212

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 ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014

Transaction ID : 4238575

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **145.00**

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 634 OF 2648
	<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)
EMILY's List

A. Ms. Emili M. Grantham
 Full Name (Last, First, Middle Initial)
 Mailing Address 6515 Whitney Road
 City State Zip Code
 Graham NC 27253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2014
Transaction ID : 4244869
 Amount of Each Receipt this Period
 25.00

B. Ms. Koene R. Graves
 Full Name (Last, First, Middle Initial)
 Mailing Address 2525 Old Grove Ln
 City State Zip Code
 Paso Robles CA 93446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Gcfs, Inc Executive
 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
 12 / 01 / 2014
Transaction ID : 4230485
 Amount of Each Receipt this Period
 150.00

C. Mr. Mrs. Diane Graves
 Full Name (Last, First, Middle Initial)
 Mailing Address 1422 Hawks Meadow
 City State Zip Code
 San Antonio TX 78248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Trinity University University Librarian
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228803
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	185.00
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 635 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Mrs. Diane Graves		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242061
Mailing Address 1422 Hawks Meadow		Amount of Each Receipt this Period 10.00
City San Antonio	State TX	Zip Code 78248
FEC ID number of contributing federal political committee. C		
Name of Employer Trinity University	Occupation University Librarian	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. Gina Graves		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230144
Mailing Address 904b S Fairview Road		Amount of Each Receipt this Period 20.00
City Columbia	State MO	Zip Code 65203
FEC ID number of contributing federal political committee. C		
Name of Employer University Of Missouri School Of Medic	Occupation Administrative Support	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Gina Graves		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240791
Mailing Address 904b S Fairview Road		Amount of Each Receipt this Period 20.00
City Columbia	State MO	Zip Code 65203
FEC ID number of contributing federal political committee. C		
Name of Employer University Of Missouri School Of Medic	Occupation Administrative Support	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 636 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Martha S. Gray

Mailing Address 3108 Bluff Blvd.

City	State	Zip Code
Holiday	FL	34691

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

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2014

Transaction ID : 4235205

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)
B. Ms. Shirley Gray

Mailing Address 4109 S. Maricopa Pl.

City	State	Zip Code
Sierra Vista	AZ	85650

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

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2014

Transaction ID : 4231027

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)
C. Dorothy N. Gray

Mailing Address 1608 Chinnapakin Nene

City	State	Zip Code
Tallahassee	FL	32301

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

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228804

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 637 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Nancy Graybeal

Mailing Address 39675 E KNIERIEM RD

City State Zip Code
Corbett OR 97019

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 ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239871

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. Ms. Esther Sigler Greco

Mailing Address 21723 Saratoga DR

City State Zip Code
Lexington Park MD 20653

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

Name of Employer Occupation
Requested Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
419.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230486

Amount of Each Receipt this Period
 86.00

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

Mailing Address 424 W 110th St Apt 4k

City State Zip Code
New York NY 10025

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

Name of Employer Occupation
American Cotton Growers Llc Office Manager/ Opera Singer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237093

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 126.00

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 638 OF 2648
	<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)
EMILY's List

A. Mrs. Joan F Green
Full Name (Last, First, Middle Initial)

Mailing Address 555 Laurel St.

City San Francisco State CA Zip Code 94118

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

Name of Employer Jewish Coalition For Literacy Occupation Reading Specialist/Trainer

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
 12 / 23 / 2014

Transaction ID : 4239872

Amount of Each Receipt this Period
100.00

B. Ms. Nancy H. Green
Full Name (Last, First, Middle Initial)

Mailing Address 2774 Andrews Drive, Apt. 9

City Atlanta State GA Zip Code 30305

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

Name of Employer NA Occupation NA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : 4231030

Amount of Each Receipt this Period
1000.00

C. Mr. Michael Green
Full Name (Last, First, Middle Initial)

Mailing Address 500 Buena Vista St.

City Cheney State WA Zip Code 99004

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 ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014

Transaction ID : 4231029

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **1160.00**

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 639 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Hazel Green

Mailing Address 376 Minnie Way

City State Zip Code
Bowling Green KY 42101

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238579

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Mr. Herbert Green

Mailing Address 2874 1st ST

City State Zip Code
Monroe MI 48162

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
501.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231028

Amount of Each Receipt this Period
113.00

Full Name (Last, First, Middle Initial)
C. Ms. Beth S. Green

Mailing Address 34 Ellington St.

City State Zip Code
Longmeadow MA 01106

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236470

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 353.00

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 640 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Doug Green
 Full Name (Last, First, Middle Initial)
 Mailing Address 4704 Yachtsmans Dr
 City Fernandina Beach State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Software
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235465
 Amount of Each Receipt this Period
 25.00

B. Doug Green
 Full Name (Last, First, Middle Initial)
 Mailing Address 4704 Yachtsmans Dr
 City Fernandina Beach State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Software
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235887
 Amount of Each Receipt this Period
 25.00

C. Doug Green
 Full Name (Last, First, Middle Initial)
 Mailing Address 4704 Yachtsmans Dr
 City Fernandina Beach State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Software
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239873
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 641 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Betty J. Green		Date of Receipt
Mailing Address 730 Coralberry Ln.		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Madison OH 44057		Transaction ID : 4227918
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="410.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Betty J. Green		Date of Receipt
Mailing Address 730 Coralberry Ln.		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Madison OH 44057		Transaction ID : 4240737
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="410.00"/>	

Full Name (Last, First, Middle Initial) C. Mr. Frank S. Greenberg		Date of Receipt
Mailing Address 5721 Bahama Shores Dr. S.		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City State Zip Code St. Petersburg FL 33705		Transaction ID : 4228266
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer Requested	Occupation Requested	
None	None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="320.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="50.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 642 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Greendorfer		Date of Receipt
Mailing Address 5140 N Fairway Heights Dr		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City State Zip Code Tucson AZ 85749		Transaction ID : 4230489
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="125.00"/>
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 ▼ <input type="text" value="375.00"/>	

Full Name (Last, First, Middle Initial) B. Cynthia Greene		Date of Receipt
Mailing Address 2555 Ponce De Leon Blvd. Suite 230		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City State Zip Code Coral Gables FL 33134		Transaction ID : 4229638
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer Greene Smith, P.A.	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Cynthia Greene		Date of Receipt
Mailing Address 2555 Ponce De Leon Blvd. Suite 230		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City State Zip Code Coral Gables FL 33134		Transaction ID : 4238580
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Greene Smith, P.A.	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="275.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 643 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Zina G. Greene		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233717
Mailing Address 3133 Connecticut Ave. NW Apt. 1014		Amount of Each Receipt this Period 100.00
City Washington	State DC	Zip Code 20008
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 ▼ 1935.00	

Full Name (Last, First, Middle Initial) B. Ms. Eliza T. Greene		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228807
Mailing Address 13450 Skyline Blvd		Amount of Each Receipt this Period 25.00
City Oakland	State CA	Zip Code 94619
FEC ID number of contributing federal political committee. C		
Name of Employer Tiemstra Law Group, Pc	Occupation Office Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. Ms. Eliza T. Greene		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241614
Mailing Address 13450 Skyline Blvd		Amount of Each Receipt this Period 25.00
City Oakland	State CA	Zip Code 94619
FEC ID number of contributing federal political committee. C		
Name of Employer Tiemstra Law Group, Pc	Occupation Office Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 644 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Sue Greenfeld		Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227633
Mailing Address 16514 14th Ave. S.E.		Amount of Each Receipt this Period 75.00
City Mill Creek	State WA	Zip Code 98012
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation Retired		Aggregate Year-to-Date ▼ 350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. H. Gaylon Greenhill		Date of Receipt M M / D D / Y Y Y Y 12 / 08 / 2014 Transaction ID : 4232967
Mailing Address 435 W. Starin Road #113aa		Amount of Each Receipt this Period 50.00
City Whitewater	State WI	Zip Code 53190
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation Retired		Aggregate Year-to-Date ▼ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Leith Greenslade		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241322
Mailing Address 151 East 85th St, 8d		Amount of Each Receipt this Period 50.00
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee. C	Name of Employer Mdg Health Alliance	
Occupation Global Women And Children's Health		Aggregate Year-to-Date ▼ 800.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 646 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Penny Greenwood		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227919
Mailing Address PO Box 965		Amount of Each Receipt this Period 50.00
City White Salmon	State WA	Zip Code 98672
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 725.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	

Full Name (Last, First, Middle Initial) B. Ms. Penny Greenwood		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240817
Mailing Address PO Box 965		Amount of Each Receipt this Period 50.00
City White Salmon	State WA	Zip Code 98672
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 725.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	

Full Name (Last, First, Middle Initial) C. Alan Greenwood		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228808
Mailing Address PO Box 965		Amount of Each Receipt this Period 16.00
City White Salmon	State WA	Zip Code 98672
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 228.00
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 ▼ 228.00	

SUBTOTAL of Receipts This Page (optional).....▶	116.00
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 647 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Alan Greenwood		Date of Receipt										
Mailing Address PO Box 965		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>28</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	12		28		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
12		28		2014								
City State Zip Code White Salmon WA 98672		Transaction ID : 4242064										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer Occupation None Retired		<table border="1"> <tr> <td>16.00</td> </tr> </table>	16.00									
16.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>228.00</td> </tr> </table>	228.00										
228.00												

Full Name (Last, First, Middle Initial) B. Ms. Cynthia Gregory		Date of Receipt										
Mailing Address 1143g La Rochelle Terrace		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	12		05		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
12		05		2014								
City State Zip Code Sunnyvale CA 94089		Transaction ID : 4232759										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer Occupation Cisco Manager		<table border="1"> <tr> <td>5.00</td> </tr> </table>	5.00									
5.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>215.00</td> </tr> </table>	215.00										
215.00												

Full Name (Last, First, Middle Initial) c. Ms. Cynthia Gregory		Date of Receipt										
Mailing Address 1143g La Rochelle Terrace		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>27</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	11		27		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
11		27		2014								
City State Zip Code Sunnyvale CA 94089		Transaction ID : 4228291										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer Occupation Cisco Manager		<table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00									
10.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>215.00</td> </tr> </table>	215.00										
215.00												

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>31.00</td> </tr> </table>	31.00
31.00		
TOTAL This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 648 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cynthia Gregory		Date of Receipt
Mailing Address 1143g La Rochelle Terrace		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City Sunnyvale State CA Zip Code 94089		Transaction ID : 4241147
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="10.00"/>	
Name of Employer Cisco Occupation Manager	Aggregate Year-to-Date <input type="text" value="215.00"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Elizabeth Gregory		Date of Receipt
Mailing Address 20 Nanigian Lane		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City Paxton State MA Zip Code 01612		Transaction ID : 4239875
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="25.00"/>	
Name of Employer None Occupation None	Aggregate Year-to-Date <input type="text" value="343.00"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Maryann H Gregory		Date of Receipt
Mailing Address 22 Golden Eagle Ct		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Westminster State MD Zip Code 21158		Transaction ID : 4228809
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="10.00"/>	
Name of Employer None Occupation Retired	Aggregate Year-to-Date <input type="text" value="370.00"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 649 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Maryann H Gregory		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
Mailing Address 22 Golden Eagle Ct		Transaction ID : 4242065
City Westminster	State MD	Zip Code 21158
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00	
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 ▼ 370.00	

Full Name (Last, First, Middle Initial) B. Ms. Elizabeth Gregory		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014
Mailing Address 2235 McClendon		Transaction ID : 4233653
City Houston	State TX	Zip Code 77030
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer University Of Houston	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. Donald Grether		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014
Mailing Address 1031 Oxford St		Transaction ID : 4230174
City Berkeley	State CA	Zip Code 94707
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
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 ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 651 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Edith Griffin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234107
Mailing Address 1610 Milton St.		Amount of Each Receipt this Period 810.00
City Tallahassee	State FL	Zip Code 32303
FEC ID number of contributing federal political committee. C	Name of Employer None	Occupation None
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) B. Ms. Susan S. Griffith		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233736
Mailing Address 4301 Westbank Dr Ste B-100		Amount of Each Receipt this Period 750.00
City Austin	State TX	Zip Code 78746
FEC ID number of contributing federal political committee. C	Name of Employer Self Employed	Occupation Realtor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00	

Full Name (Last, First, Middle Initial) C. Robert Griffith		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237137
Mailing Address 106 Forest Drive		Amount of Each Receipt this Period 25.00
City Morgantown	State WV	Zip Code 26505
FEC ID number of contributing federal political committee. C	Name of Employer West Virginia University	Occupation College Professor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	810.00
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 652 OF 2648
	<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)
EMILY's List

A. Ms. Susan C. Grigaliunas
Full Name (Last, First, Middle Initial)
Mailing Address 2726 Custer Way
City Las Cruces State NM Zip Code 88011
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228813
Amount of Each Receipt this Period
25.00

B. Dawn Grimes
Full Name (Last, First, Middle Initial)
Mailing Address 1235 Lunar Ln
City Dallas State TX Zip Code 75218
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Banowetz & Co. Senior Production Manager
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 / 25 / 2014
Transaction ID : 4229824
Amount of Each Receipt this Period
50.00

C. Dawn Grimes
Full Name (Last, First, Middle Initial)
Mailing Address 1235 Lunar Ln
City Dallas State TX Zip Code 75218
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Banowetz & Co. Senior Production Manager
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
12 / 23 / 2014
Transaction ID : 4239876
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 653 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Helen Grogan
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 Old Colony Way # 1
 City Orleans State MA Zip Code 02653
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240303
 Amount of Each Receipt this Period
 50.00

B. Lilah Groisser
 Full Name (Last, First, Middle Initial)
 Mailing Address 1010 Waltham St Apt 219
 City Lexington State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228817
 Amount of Each Receipt this Period
 15.00

C. Lilah Groisser
 Full Name (Last, First, Middle Initial)
 Mailing Address 1010 Waltham St Apt 219
 City Lexington State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241462
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 654 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Annette Grollman		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237226
Mailing Address 14 Childs Lane		Amount of Each Receipt this Period 50.00
City Setauket	State NY	Zip Code 11733
FEC ID number of contributing federal political committee. C		
Name of Employer Oestreicher Medical Comm	Occupation Medical Writer/Editor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Ms. Sharon M Grosfeld		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232886
Mailing Address 9906 Old Spring Road		Amount of Each Receipt this Period 20.00
City Kensington	State MD	Zip Code 20895
FEC ID number of contributing federal political committee. C		
Name of Employer Paula J. Peters, P.A.	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Stephen Gross		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228818
Mailing Address 126 Brookside Avenue		Amount of Each Receipt this Period 15.00
City Belmont	State MA	Zip Code 02478
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Hospice Chaplain	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 655 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Stephen Gross
 Full Name (Last, First, Middle Initial)
 Mailing Address 126 Brookside Avenue
 City Belmont State MA Zip Code 02478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Hospice Chaplain
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243515
 Amount of Each Receipt this Period
 15.00

B. Mary Ruth Gross
 Full Name (Last, First, Middle Initial)
 Mailing Address 3315 Clearfield Ave.
 City Richmond State CA Zip Code 94803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228819
 Amount of Each Receipt this Period
 15.00

C. Mary Ruth Gross
 Full Name (Last, First, Middle Initial)
 Mailing Address 3315 Clearfield Ave.
 City Richmond State CA Zip Code 94803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243434
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 656 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elinor Gross		Date of Receipt
Mailing Address 132 Minuteman Circle		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4237729
Allentown	NJ	Amount of Each Receipt this Period
Zip Code		<input type="text" value="200.00"/>
08501		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Ocean County Library System	Public Librarian	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="440.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Flora Grossman		Date of Receipt
Mailing Address 2 Hamilton Rd Apt 3L		<input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4236118
Morristown	NJ	Amount of Each Receipt this Period
Zip Code		<input type="text" value="300.00"/>
07960		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Hanna Grossman		Date of Receipt
Mailing Address 221 Flat Rocks Rd.		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4230496
Cornwall Bridge	CT	Amount of Each Receipt this Period
Zip Code		<input type="text" value="150.00"/>
06754		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
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) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="470.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 657 OF 2648
	<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)
EMILY's List

A. Mrs. Harriet R. Grossman
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 W End Ave Apt 7c
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237622
 Amount of Each Receipt this Period
 10.00

B. Dr. Barbara W. Grover
 Full Name (Last, First, Middle Initial)
 Mailing Address 5526 Wilkins Ave
 City Pittsburgh State PA Zip Code 15217
 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 ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227742
 Amount of Each Receipt this Period
 100.00

C. Ms. Jeanette L. Gruber
 Full Name (Last, First, Middle Initial)
 Mailing Address 3814 N Monroe
 City Peoria Hts State IL Zip Code 61616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Cpa
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236068
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 658 OF 2648
	<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)
EMILY's List

A. Ms. Sharon Gruber
Full Name (Last, First, Middle Initial)

Mailing Address 2 Harford Place

City Hillsborough State NJ Zip Code 08844

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

Name of Employer Sts Consulting Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4232087

Amount of Each Receipt this Period
200.00

B. Ms. Barbara Gruenewald
Full Name (Last, First, Middle Initial)

Mailing Address 781 Manor Dr.

City Reno State NV Zip Code 89509

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

Name of Employer Requested Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 689.00

Date of Receipt
12 / 17 / 2014
Transaction ID : 4237382

Amount of Each Receipt this Period
188.00

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

Mailing Address 532c Zenk Rd

City Troy State IL Zip Code 62294

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

Name of Employer St. Louis Children's Hospital Occupation Rn Case Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234133

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 218.00

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 659 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Miss Iris A. Gruwell		Date of Receipt
Mailing Address 290 Stoneykirk Drive		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bella Vista	AR	72715
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4236866
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="407.00"/>	

Full Name (Last, First, Middle Initial) B. Miss Iris A. Gruwell		Date of Receipt
Mailing Address 290 Stoneykirk Drive		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bella Vista	AR	72715
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4228820
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="407.00"/>	

Full Name (Last, First, Middle Initial) C. Miss Iris A. Gruwell		Date of Receipt
Mailing Address 290 Stoneykirk Drive		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bella Vista	AR	72715
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4242070
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="407.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="55.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 660 OF 2648
	<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)
EMILY's List

A. Roland Gubisch
Full Name (Last, First, Middle Initial)

Mailing Address 74 Chestnut St

City Andover State MA Zip Code 01810

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 ▼ 263.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014

Transaction ID : 4231535

Amount of Each Receipt this Period
 75.00

B. Mrs. Marilynn Guinane
Full Name (Last, First, Middle Initial)

Mailing Address 961 Lower Rhiney Creek Rd

City Hallstead State PA Zip Code 18822

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4236742

Amount of Each Receipt this Period
 15.00

C. Mrs. Marilynn Guinane
Full Name (Last, First, Middle Initial)

Mailing Address 961 Lower Rhiney Creek Rd

City Hallstead State PA Zip Code 18822

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : 4238584

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 661 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lois E. Gullerud		Date of Receipt
Mailing Address 1208 W. Daniel		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Champaign	IL	61821
FEC ID number of contributing federal political committee.		Transaction ID : 4231329
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="350.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="535.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Rolf Gunnar		Date of Receipt
Mailing Address 737 Godair Circle		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hinsdale	IL	60521
FEC ID number of contributing federal political committee.		Transaction ID : 4233440
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer	Occupation	
Self	Physician - Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="545.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Rolf Gunnar		Date of Receipt
Mailing Address 737 Godair Circle		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hinsdale	IL	60521
FEC ID number of contributing federal political committee.		Transaction ID : 4230498
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>
Name of Employer	Occupation	
Self	Physician - Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="545.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="125.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 662 OF 2648
	<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)
EMILY's List

A. Diane Guta
Full Name (Last, First, Middle Initial)

Mailing Address 748 SE Lambert

City Portland State OR Zip Code 97202

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

Name of Employer McHd Occupation Nurse Practitioner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 12 / 05 / 2014
Transaction ID : 4232768

Amount of Each Receipt this Period 75.00

B. Ms. Carolyn L Haack
Full Name (Last, First, Middle Initial)

Mailing Address 702 Waukegan Rd.

City Glenview State IL Zip Code 60025

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 ▼ 240.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4234964

Amount of Each Receipt this Period 20.00

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

Mailing Address 561 Route 87

City Columbia State CT Zip Code 06237

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

Name of Employer Brown Pamdiris And Scott Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 01 / 2014
Transaction ID : 4231033

Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 245.00

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 663 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Merrily Haas		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232693
Mailing Address 20887 SW Willapa Way		Amount of Each Receipt this Period 17.00
City Tualatin	State OR	FEC ID number of contributing federal political committee. C
Zip Code 97062	Occupation Executive	Name of Employer OR Assoc Education You
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00	

Full Name (Last, First, Middle Initial) B. Elizabeth Haase		Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227924
Mailing Address Suite 620, 119 West 57th Street		Amount of Each Receipt this Period 25.00
City New York	State NY	FEC ID number of contributing federal political committee. C
Zip Code 10019	Occupation Psychiatrist	Name of Employer Self
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Elizabeth Haase		Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240793
Mailing Address Suite 620, 119 West 57th Street		Amount of Each Receipt this Period 25.00
City New York	State NY	FEC ID number of contributing federal political committee. C
Zip Code 10019	Occupation Psychiatrist	Name of Employer Self
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	67.00
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 664 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Frances Haberl
 Full Name (Last, First, Middle Initial)
 Mailing Address 497 Leesburg Farms Ln.
 City State Zip Code
 Cynthiana KY 41031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231034
 Amount of Each Receipt this Period
 225.00

B. Ms. Susan McCormick Hadley
 Full Name (Last, First, Middle Initial)
 Mailing Address 15297 Edgewater Circle
 City State Zip Code
 Prior Lake MN 55372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236067
 Amount of Each Receipt this Period
 250.00

C. Pam Hagen
 Full Name (Last, First, Middle Initial)
 Mailing Address 137 Rivas
 City State Zip Code
 San Francisco CA 94132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229915
 Amount of Each Receipt this Period
 5.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 480.00
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 665 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Pam Hagen

Mailing Address 137 Rivas

City San Francisco State CA Zip Code 94132

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014

Transaction ID : 4240466

Amount of Each Receipt this Period
5.00

Full Name (Last, First, Middle Initial)
B. Ms. Margaret Hagerman

Mailing Address 2042 Hagen Ln

City Flossmoor State IL Zip Code 60422

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

Name of Employer Gould & Ratner Llp Occupation Financial Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2014

Transaction ID : 4230220

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Ms. Margaret Hagerman

Mailing Address 2042 Hagen Ln

City Flossmoor State IL Zip Code 60422

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

Name of Employer Gould & Ratner Llp Occupation Financial Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2014

Transaction ID : 4244901

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **35.00**

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 666 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margaret Hagerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2042 Hagen Ln
 City Flossmoor State IL Zip Code 60422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gould & Ratner Llp Occupation Financial Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4244930
 Amount of Each Receipt this Period
 15.00

B. Ann B. Haggerty
 Full Name (Last, First, Middle Initial)
 Mailing Address 81 Clement Avenue
 City Saratoga Springs State NY Zip Code 12866
 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 ▼ 615.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228824
 Amount of Each Receipt this Period
 20.00

c. Ann B. Haggerty
 Full Name (Last, First, Middle Initial)
 Mailing Address 81 Clement Avenue
 City Saratoga Springs State NY Zip Code 12866
 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 ▼ 615.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242074
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 667 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ann B. Haggerty		Date of Receipt 12 / 20 / 2014 Transaction ID : 4239263
Mailing Address 81 Clement Avenue		Amount of Each Receipt this Period 25.00
City Saratoga Springs	State NY	Zip Code 12866
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
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 ▼ 615.00	

Full Name (Last, First, Middle Initial) B. John Hagner		Date of Receipt 12 / 30 / 2014 Transaction ID : 4242971
Mailing Address 11417 Rolling House Road		Amount of Each Receipt this Period 250.00
City Rockville	State MD	Zip Code 20852
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Womble Carlyle Sandridge & Rice, Llp	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 790.00	

Full Name (Last, First, Middle Initial) C. Edward Hagopian		Date of Receipt 11 / 28 / 2014 Transaction ID : 4228825
Mailing Address 9251 N. Hilltop Ct		Amount of Each Receipt this Period 35.00
City Fresno	State CA	Zip Code 93720
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional).....▶	310.00
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 668 OF 2648
	<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)
EMILY's List

A. Edward Hagopian
Full Name (Last, First, Middle Initial)

Mailing Address 9251 N. Hilltop Ct

City Fresno State CA Zip Code 93720

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241463

Amount of Each Receipt this Period
35.00

B. Mr. David J. Hagquist
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1321

City Pennington State MN Zip Code 56663

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 ▼ **310.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231476

Amount of Each Receipt this Period
50.00

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

Mailing Address 1400 Geary Blvd

City San Francisco State CA Zip Code 94109

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242531

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **185.00**

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 669 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Carol Haig
 Full Name (Last, First, Middle Initial)
 Mailing Address 170 Calle Nogales
 City Walnut Creek State CA Zip Code 94597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Carol Haig & Associates Occupation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239624
 Amount of Each Receipt this Period
 50.00

B. Ms. Roselene Haines
 Full Name (Last, First, Middle Initial)
 Mailing Address 2559 Dale Ann Dr
 City Haines City State FL Zip Code 33844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232039
 Amount of Each Receipt this Period
 25.00

C. Eldon Haines
 Full Name (Last, First, Middle Initial)
 Mailing Address 4343-B NE Ainsworth St
 City Portland State OR Zip Code 97218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237136
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 670 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Karen R. Halderson		Date of Receipt 12 / 03 / 2014 Transaction ID : 4231798
Mailing Address 3301 Monroe Street, NE Unit N-148		Amount of Each Receipt this Period 25.00
City Albuquerque	State NM	
Zip Code 87110		Aggregate Year-to-Date ▼ 325.00
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) ▼

Full Name (Last, First, Middle Initial) B. Diana Hales		Date of Receipt 12 / 03 / 2014 Transaction ID : 4231722
Mailing Address 528 Will Be Ln		Amount of Each Receipt this Period 30.00
City Siler City	State NC	
Zip Code 27344		Aggregate Year-to-Date ▼ 360.00
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. George Haley		Date of Receipt 12 / 17 / 2014 Transaction ID : 4237620
Mailing Address 4400 Belmont Park Terrace #238		Amount of Each Receipt this Period 14.00
City Nashville	State TN	
Zip Code 37215		Aggregate Year-to-Date ▼ 269.00
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	69.00
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 671 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. George Haley

Mailing Address 4400 Belmont Park Terrace #238

City Nashville	State TN	Zip Code 37215
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	16	/	2014

Transaction ID : 4237238

Amount of Each Receipt this Period
85.00

Full Name (Last, First, Middle Initial)
B. Ms. Kathleen Kappy Hall

Mailing Address 316 E. Emma St.

City Lafayette	State CO	Zip Code 80026
-------------------	-------------	-------------------

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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	06	/	2014

Transaction ID : 4232495

Amount of Each Receipt this Period
20.00

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

Mailing Address 416 E. 65th St.

City Nyc	State NY	Zip Code 10065
-------------	-------------	-------------------

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 ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4239881

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 672 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Pamela Hall

Mailing Address 416 E. 65th St.

City State Zip Code
Nyc NY 10065

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239880

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Ms. Elise Hall

Mailing Address 459 Cola Ballena

City State Zip Code
Alameda CA 94501

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232778

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Mr. Charles G. Hall

Mailing Address 802 Aransas Dr

City State Zip Code
Euless TX 76039

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231038

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 320.00

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 673 OF 2648
	<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)
EMILY's List

A. Mr. Joseph Hall
Full Name (Last, First, Middle Initial)

Mailing Address 1 Pier Pointe St., Apt. 615

City Yonkers State NY Zip Code 10701

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

Name of Employer Requested Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2014

Transaction ID : 4242525

Amount of Each Receipt this Period
150.00

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

Mailing Address 606 Meadow Green Ct. S.E.

City Albuquerque State NM Zip Code 87123

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

Name of Employer Requested Occupation Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3125.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014

Transaction ID : 4227599

Amount of Each Receipt this Period
1875.00

C. Ms. Elinor Hallowell
Full Name (Last, First, Middle Initial)

Mailing Address 115 Calle Resplandor

City Tucson State AZ Zip Code 85716

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

Name of Employer Requested Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : 4230020

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... **2035.00**

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 674 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elinor Hallowell		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239883
Mailing Address 115 Calle Resplandor		Amount of Each Receipt this Period 10.00
City Tucson	State AZ	Zip Code 85716
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 ▼ 220.00	

Full Name (Last, First, Middle Initial) B. Dr. Ellen L. Halpern , Ph.D.		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232719
Mailing Address 44 East Main Street		Amount of Each Receipt this Period 25.00
City Flemington	State NJ	Zip Code 08822
FEC ID number of contributing federal political committee. C		
Name of Employer Rutgers-Newark, New School U, Icld, Se	Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mr. Gerald P. Halpern		Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2014 Transaction ID : 4235154
Mailing Address 20 Canterbury Rd Apt. 3P		Amount of Each Receipt this Period 50.00
City Great Neck	State NY	Zip Code 11021
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 675 OF 2648
	<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)
EMILY's List

A. Dr. Stanley M. Halpin
Full Name (Last, First, Middle Initial)

Mailing Address 6924 NW Hwy 9

City Kansas City State MO Zip Code 64152

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 283.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014

Transaction ID : 4235446

Amount of Each Receipt this Period
 20.00

B. Dr. Stanley M. Halpin
Full Name (Last, First, Middle Initial)

Mailing Address 6924 NW Hwy 9

City Kansas City State MO Zip Code 64152

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 283.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : 4237113

Amount of Each Receipt this Period
 25.00

C. Mr. George A. Halsey
Full Name (Last, First, Middle Initial)

Mailing Address 111 Camellia Way

City Hendersonville State NC Zip Code 28739

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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014

Transaction ID : 4231784

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00

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 676 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. George A. Halsey		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2014 Transaction ID : 4236014
Mailing Address 111 Camellia Way		Amount of Each Receipt this Period 30.00
City Hendersonville	State NC	Zip Code 28739
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 ▼ 650.00	

Full Name (Last, First, Middle Initial) B. Ms. Anne Halverson		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236451
Mailing Address P.O. Box 881695		Amount of Each Receipt this Period 200.00
City Steamboat Springs	State CO	Zip Code 80488
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 ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Sandra Hamilton		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2014 Transaction ID : 4231799
Mailing Address 14 Irish Road		Amount of Each Receipt this Period 25.00
City Ranchos De Taos	State NM	Zip Code 87557
FEC ID number of contributing federal political committee. C		
Name of Employer Family Practice Associates Of Taos	Occupation Family Nurse Practitioner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	255.00
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 677 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Joseph P. Hamilton		Date of Receipt
Mailing Address 5130 W Winona St		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chicago	IL	60630
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4229766
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="255.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="255.00"/>	

Full Name (Last, First, Middle Initial) B. Joseph P. Hamilton		Date of Receipt
Mailing Address 5130 W Winona St		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chicago	IL	60630
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4239884
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="255.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="255.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Laura W. Hamilton		Date of Receipt
Mailing Address 707 Randolph Ave.		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Huntsville	AL	35801
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4238590
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1200.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 678 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Barbara R. Hamilton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239560	
Mailing Address 2884 Treasure Island Rd.		Amount of Each Receipt this Period 25.00	
City Port St Lucie	State FL	Zip Code 34952	
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Retired	Aggregate Year-to-Date ▼ 503.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mrs. Barbara R. Hamilton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240913	
Mailing Address 2884 Treasure Island Rd.		Amount of Each Receipt this Period 25.00	
City Port St Lucie	State FL	Zip Code 34952	
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Retired	Aggregate Year-to-Date ▼ 503.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Wendolyn H. Hamlin-Smith		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4231983	
Mailing Address 100 Burnt Bridge Way Apt H		Amount of Each Receipt this Period 100.00	
City Yorktown	State VA	Zip Code 23692	
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Retired	Aggregate Year-to-Date ▼ 900.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	150.00

**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 679 OF 2648
	<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)
EMILY's List

A. Mary Hammer
Full Name (Last, First, Middle Initial)
Mailing Address 823 Middleton Dr
City Boulder Creek State CA Zip Code 95006
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 ▼ 685.00

Date of Receipt 11 / 28 / 2014
Transaction ID : 4228830
Amount of Each Receipt this Period 50.00

B. Mary Hammer
Full Name (Last, First, Middle Initial)
Mailing Address 823 Middleton Dr
City Boulder Creek State CA Zip Code 95006
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 ▼ 685.00

Date of Receipt 12 / 28 / 2014
Transaction ID : 4241712
Amount of Each Receipt this Period 50.00

C. Mrs. Ilze Hammersley
Full Name (Last, First, Middle Initial)
Mailing Address 1459 Woodstream RD
City Perrysburg State OH Zip Code 43551
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4234707
Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 680 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Marian R. Hammond
 Full Name (Last, First, Middle Initial)
 Mailing Address 609 Frederick St., Apt. 272
 City Santa Cruz State CA Zip Code 95062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1422.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227683
 Amount of Each Receipt this Period
 338.00

B. Ms. Christina N. Hammond
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 Crestview Rd.
 City Millbrook State NY Zip Code 12545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 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
 12 / 30 / 2014
Transaction ID : 4242714
 Amount of Each Receipt this Period
 200.00

C. Sheila Hammonds
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O.Box 767093
 City Roswell State GA Zip Code 30076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233698
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 558.00
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 681 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Janice G. Hamrin
 Full Name (Last, First, Middle Initial)
 Mailing Address 359 Molino Ave
 City Mill Valley State CA Zip Code 94941
 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 ▼ 590.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228832
 Amount of Each Receipt this Period
 25.00

B. Dr. Janice G. Hamrin
 Full Name (Last, First, Middle Initial)
 Mailing Address 359 Molino Ave
 City Mill Valley State CA Zip Code 94941
 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 ▼ 590.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241307
 Amount of Each Receipt this Period
 25.00

C. Ms. Shirley M. Handel
 Full Name (Last, First, Middle Initial)
 Mailing Address 502 Applewood Cir.
 City Poughkeepsie State NY Zip Code 12601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HdI Associates Inc Occupation Corporate Exec
 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 / 25 / 2014
Transaction ID : 4227446
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 682 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

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

Mailing Address 14907 Claude Lane

City State Zip Code
Silver Spring MD 20905

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

Name of Employer Occupation
Un Ited Unions Building Guard

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2014
Transaction ID : 4231800

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Mr. Bruce Hann

Mailing Address 1241 Olive St

City State Zip Code
Denver CO 80220

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

Name of Employer Occupation
None Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4239886

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
C. Ms. Dena G. Hanold

Mailing Address 1630a 30th St

City State Zip Code
Boulder CO 80301

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 ▼ **225.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : 4232766

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **65.00**

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 683 OF 2648
	(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)
EMILY's List

A. John E. Hansan
Full Name (Last, First, Middle Initial)

Mailing Address 6813 Rosemont Dr

City State Zip Code
Mc Lean VA 22101

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4227571

Amount of Each Receipt this Period
300.00

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

Mailing Address 1935 N Curson Place

City State Zip Code
Los Angeles CA 90046

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

Name of Employer Occupation
Esa Consultant

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
12 / 12 / 2014
Transaction ID : 4236030

Amount of Each Receipt this Period
25.00

C. Ms. Jean Hansen
Full Name (Last, First, Middle Initial)

Mailing Address 229 Linden St

City State Zip Code
Northville MI 48167

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 ▼
215.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014
Transaction ID : 4237625

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	335.00
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 684 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jean Hansen
 Full Name (Last, First, Middle Initial)
 Mailing Address 229 Linden St
 City Northville State MI Zip Code 48167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239888
 Amount of Each Receipt this Period
 10.00

B. Marilyn Hansen
 Full Name (Last, First, Middle Initial)
 Mailing Address 620 South Norbury Avenue
 City Lombard State IL Zip Code 60148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237767
 Amount of Each Receipt this Period
 25.00

C. Mr. Robert Hansen
 Full Name (Last, First, Middle Initial)
 Mailing Address 18651 Wells Drive
 City Tarzana State CA Zip Code 91356
 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 ▼ 979.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242645
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 685 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert Hansen		Date of Receipt
Mailing Address 18651 Wells Drive		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Tarzana State CA Zip Code 91356		Transaction ID : 4242693
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer None Occupation Retired		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="979.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Maureen R. Hanson		Date of Receipt
Mailing Address 316 Comstock Rd		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Ithaca State NY Zip Code 14850		Transaction ID : 4242682
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Cornell University Occupation Scientist		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="300.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Jane Hanson		Date of Receipt
Mailing Address 249 W. 29th St., Apt. 8s		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City New York State NY Zip Code 10001		Transaction ID : 4233840
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Milbank Tweed Occupation lawyer		<input type="text" value="150.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="600.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 686 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jeanne Hanson
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 Goddard Rd.
 City Gilbertville State MA Zip Code 01031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229573
 Amount of Each Receipt this Period
 15.00

B. Ms. Jeanne Hanson
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 Goddard Rd.
 City Gilbertville State MA Zip Code 01031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241464
 Amount of Each Receipt this Period
 15.00

C. Margaret Hanson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1059 Rector Lane
 City McLean State VA Zip Code 22102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Writer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235905
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 687 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Heidi Hanson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5971 Millrace Court E304
 City Columbia State MD Zip Code 21045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Maryland Occupation Librarian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231805
 Amount of Each Receipt this Period
 10.00

B. Ms. Heidi Hanson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5971 Millrace Court E304
 City Columbia State MD Zip Code 21045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Maryland Occupation Librarian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227927
 Amount of Each Receipt this Period
 15.00

C. Ms. Heidi Hanson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5971 Millrace Court E304
 City Columbia State MD Zip Code 21045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Maryland Occupation Librarian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240697
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00
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 688 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Kimberly R. Harbeck
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 Coggins Dr Apt 297
 City Pleasant Hill State CA Zip Code 94523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237505
 Amount of Each Receipt this Period
 75.00

B. Ernest Harburg
 Full Name (Last, First, Middle Initial)
 Mailing Address 636 Broadway #1207
 City New York State NY Zip Code 10012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Researcher, Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235317
 Amount of Each Receipt this Period
 500.00

c. Janet Harding
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 Doud Dr
 City Los Altos State CA Zip Code 94022
 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 ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230128
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	595.00
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 689 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Janet Harding
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 Doud Dr
 City Los Altos State CA Zip Code 94022
 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 ▼ 480.00

Date of Receipt
 12 / 16 / 2014
Transaction ID : 4237130
 Amount of Each Receipt this Period
 20.00

B. Janet Harding
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 Doud Dr
 City Los Altos State CA Zip Code 94022
 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 ▼ 480.00

Date of Receipt
 12 / 26 / 2014
Transaction ID : 4240775
 Amount of Each Receipt this Period
 20.00

C. Ms. Bonita Harding
 Full Name (Last, First, Middle Initial)
 Mailing Address 17022 190th Avenue SE
 City Renton State WA Zip Code 98058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 12 / 09 / 2014
Transaction ID : 4234055
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 690 OF 2648
	<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)
EMILY's List

A. Kaarin Hardy
Full Name (Last, First, Middle Initial)

Mailing Address 765 Bowhill Rd

City Hillsborough State CA Zip Code 94010

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

Name of Employer None Occupation Volunteer

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
 12 / 20 / 2014
Transaction ID : 4239192

Amount of Each Receipt this Period
 25.00

B. Ms. Joyce Harkness
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 694

City Ralston State WY Zip Code 82440

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 ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230504

Amount of Each Receipt this Period
 50.00

C. Mr. Donald Harland
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2080

City Candler State NC Zip Code 28715

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

Name of Employer Hospital Occupation Nurse

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228836

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00

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 691 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Donald Harland			Date of Receipt
Mailing Address PO Box 2080			<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4242081
Candler	NC	28715	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Hospital	Nurse		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Flora Harper			Date of Receipt
Mailing Address 4903 Potomac Ave NW			<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4233419
Washington	DC	20007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
None	None		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) c. Dr. Margaret N. Harrington , M.D.			Date of Receipt
Mailing Address 750 Lovell Ave			<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4228840
Mill Valley	CA	94941	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer	Occupation		
None	None		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1800.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="170.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 692 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Margaret N. Harrington , M.D.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014
Mailing Address 750 Lovell Ave		Transaction ID : 4235780
City Mill Valley	State CA	Zip Code 94941
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

Full Name (Last, First, Middle Initial) B. Dr. Margaret N. Harrington , M.D.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
Mailing Address 750 Lovell Ave		Transaction ID : 4242085
City Mill Valley	State CA	Zip Code 94941
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

Full Name (Last, First, Middle Initial) C. Ms. Katherine Harrington		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2014
Mailing Address 128 Brown Knight Ln		Transaction ID : 4234001
City Lewisville	State TX	Zip Code 75056
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00	
Name of Employer Wesley Um Church	Occupation Pre School Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

SUBTOTAL of Receipts This Page (optional).....▶	215.00
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 693 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Tamara Harris		Date of Receipt
Mailing Address 10175 Sun Star RD		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Monterey	CA	93940
FEC ID number of contributing federal political committee.		Transaction ID : 4230142
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="240.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Tamara Harris		Date of Receipt
Mailing Address 10175 Sun Star RD		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
Monterey	CA	93940
FEC ID number of contributing federal political committee.		Transaction ID : 4239892
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Barbara A. Harris		Date of Receipt
Mailing Address 94 Northampton Blvd		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Stafford	VA	22554
FEC ID number of contributing federal political committee.		Transaction ID : 4237898
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="35.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="280.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 694 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jan Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 5919 Fredricks Road
 City Sebastopol State CA Zip Code 95472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 12 / 23 / 2014
Transaction ID : 4239890
 Amount of Each Receipt this Period
 75.00

B. Ms. Ann S. Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 1315 Denniston St
 City Pittsburgh State PA Zip Code 15217
 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 ▼ 240.00

Date of Receipt
 12 / 05 / 2014
Transaction ID : 4232725
 Amount of Each Receipt this Period
 20.00

C. Mr. Robert W. Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 County Road 4877
 City Copperas Cove State TX Zip Code 76522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Construction, Framing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231043
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 695 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Pia Harris-Ebert		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4244854
Mailing Address 1696 Curry Comb Drive		Amount of Each Receipt this Period 20.00
City San Marcos	State CA	Zip Code 92069
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Stephen Harrison		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239655
Mailing Address 19R Sparhawk St		Amount of Each Receipt this Period 75.00
City Brighton	State MA	Zip Code 02135
FEC ID number of contributing federal political committee. C		
Name of Employer Howard Hughes Medical Institute	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) C. Ms. Sarah Harrison		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228843
Mailing Address 1255 S. Maple Rd., #101		Amount of Each Receipt this Period 10.00
City Ann Arbor	State MI	Zip Code 48103
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 696 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sarah Harrison		Date of Receipt
Mailing Address 1255 S. Maple Rd., #101		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4242087
Ann Arbor	MI	Amount of Each Receipt this Period
Zip Code		<input type="text" value="10.00"/>
48103		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Kay M. Harry		Date of Receipt
Mailing Address 3535 First Ave,5b		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4239155
San Diego	CA	Amount of Each Receipt this Period
Zip Code		<input type="text" value="25.00"/>
92103		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="655.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Rosie Harsch		Date of Receipt
Mailing Address 8635 W Sahara #656		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4232055
Las Vegas	NV	Amount of Each Receipt this Period
Zip Code		<input type="text" value="10.00"/>
89117		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Realty One Group	Self/Realtor	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 697 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Nancy Conlee Hart
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 Old Settler Road
 City State Zip Code
 Kyle TX 78640
 Date of Receipt: 11 / 27 / 2014
Transaction ID : 4228352
 Amount of Each Receipt this Period: 20.00
 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: 240.00

B. Ms. Nancy Conlee Hart
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 Old Settler Road
 City State Zip Code
 Kyle TX 78640
 Date of Receipt: 12 / 27 / 2014
Transaction ID : 4241186
 Amount of Each Receipt this Period: 20.00
 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: 240.00

C. Ms. Mary Margaret Hart
 Full Name (Last, First, Middle Initial)
 Mailing Address 2703 Valley View Rd.
 City State Zip Code
 Bellefonte PA 16823
 Date of Receipt: 11 / 28 / 2014
Transaction ID : 4228846
 Amount of Each Receipt this Period: 25.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Self Occupation: Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 698 OF 2648
	<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)
EMILY's List

A. Ms. Mary Margaret Hart
Full Name (Last, First, Middle Initial)
Mailing Address 2703 Valley View Rd.
City Bellefonte State PA Zip Code 16823
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Psychologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4241667
Amount of Each Receipt this Period 25.00

B. Ms. Lynda Hartley
Full Name (Last, First, Middle Initial)
Mailing Address 6900 W. Freemont St.
City Boise State ID Zip Code 83704
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 360.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233680
Amount of Each Receipt this Period 30.00

C. Darrell W. Hartnell
Full Name (Last, First, Middle Initial)
Mailing Address 5338 W. Hilvety Rd.
City Moweaqua State IL Zip Code 62550
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 682.00

Date of Receipt
11 / 26 / 2014
Transaction ID : 4227770
Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 699 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Barbara Harvey
 Full Name (Last, First, Middle Initial)
 Mailing Address 7090 Dushanbe Place
 City Dulles State VA Zip Code 20189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236079
 Amount of Each Receipt this Period
 50.00

B. Ms. Mary Harvey
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 Sleater Kinney Rd SE Apt 192b
 City Lacey State WA Zip Code 98503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235482
 Amount of Each Receipt this Period
 40.00

C. Ms. Anne Charlotte Harvey
 Full Name (Last, First, Middle Initial)
 Mailing Address 2242 Lawton Drive
 City Lemon Grove State CA Zip Code 91945
 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 ▼ 335.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237857
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 700 OF 2648
	<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)
EMILY's List

A. Ms. Anne Charlotte Harvey
 Full Name (Last, First, Middle Initial)
 Mailing Address 2242 Lawton Drive
 City Lemon Grove State CA Zip Code 91945
 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 ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4236004
 Amount of Each Receipt this Period
 25.00

B. Mr. David W. Haseltine
 Full Name (Last, First, Middle Initial)
 Mailing Address 146 East 46th Street
 City New York State NY Zip Code 10017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Bookkeeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234917
 Amount of Each Receipt this Period
 50.00

C. Hatheway Hasler
 Full Name (Last, First, Middle Initial)
 Mailing Address 3111 Pheasant Branch Rd. #206B
 City Middleton State WI Zip Code 53562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239893
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 701 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Hatheway Hasler

Mailing Address 3111 Pheasant Branch Rd.
#206B

City Middleton State WI Zip Code 53562

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232472

Amount of Each Receipt this Period
15.00

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

Mailing Address 23 Crabapple Ln

City Northampton State MA Zip Code 01060

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 ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4236385

Amount of Each Receipt this Period
200.00

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

Mailing Address 10389 N Ponderosa Way

City Rough and Ready State CA Zip Code 95975

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 ▼
295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235546

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	240.00
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 702 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Mary Hathaway
 Full Name (Last, First, Middle Initial)
 Mailing Address 1407 Wakefield Avenue
 City Ann Arbor State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Landlord/Rental Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231580
 Amount of Each Receipt this Period
 10.00

B. Ms. Mary Hathaway
 Full Name (Last, First, Middle Initial)
 Mailing Address 1407 Wakefield Avenue
 City Ann Arbor State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Landlord/Rental Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231802
 Amount of Each Receipt this Period
 10.00

C. Ms. Diane Hattori
 Full Name (Last, First, Middle Initial)
 Mailing Address 4826 Emerald Street
 City Torrance State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 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
 12 / 29 / 2014
Transaction ID : 4242637
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	270.00
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 703 OF 2648
	<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)
EMILY's List

A. Ms. Mary E. Haubold
Full Name (Last, First, Middle Initial)

Mailing Address 5747 SW 22nd Terrace
Apt 5

City Topeka State KS Zip Code 66614

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 ▼ 360.00

Date of Receipt
11 / 25 / 2014
Transaction ID : 4230092

Amount of Each Receipt this Period
30.00

B. Ms. Mary E. Haubold
Full Name (Last, First, Middle Initial)

Mailing Address 5747 SW 22nd Terrace
Apt 5

City Topeka State KS Zip Code 66614

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 ▼ 360.00

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240721

Amount of Each Receipt this Period
30.00

C. Ms. Carol Joy Haupt
Full Name (Last, First, Middle Initial)

Mailing Address 854 Rue De La Paix, Unit B-10

City Cincinnati State OH Zip Code 45220

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
12 / 16 / 2014
Transaction ID : 4237085

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 704 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Carol Joy Haupt
 Full Name (Last, First, Middle Initial)
 Mailing Address 854 Rue De La Paix, Unit B-10
 City Cincinnati State OH Zip Code 45220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **345.00**

Date of Receipt
 12 / 17 / 2014
Transaction ID : 4237878
 Amount of Each Receipt this Period
 15.00

B. Ms. Carol Joy Haupt
 Full Name (Last, First, Middle Initial)
 Mailing Address 854 Rue De La Paix, Unit B-10
 City Cincinnati State OH Zip Code 45220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **345.00**

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4238596
 Amount of Each Receipt this Period
 15.00

C. Mr. William Hauser
 Full Name (Last, First, Middle Initial)
 Mailing Address 128 S. Keller Ln.
 City Grandy State NC Zip Code 27939
 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 **301.00**

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231050
 Amount of Each Receipt this Period
 68.00

SUBTOTAL of Receipts This Page (optional).....▶	98.00
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 705 OF 2648
	<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)
EMILY's List

A. Ms. Sophia Havasy
Full Name (Last, First, Middle Initial)

Mailing Address 4208 Lillian St

City Houston State TX Zip Code 77007

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

Name of Employer Taimon And Assoc Occupation Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4232941

Amount of Each Receipt this Period
 150.00

B. Ms. Shirley B. Hawk
Full Name (Last, First, Middle Initial)

Mailing Address 1049 Sunset Canyon Dr. S

City Dripping Springs State TX Zip Code 78620

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231831

Amount of Each Receipt this Period
 30.00

C. Ms. Elizabeth Hawkins
Full Name (Last, First, Middle Initial)

Mailing Address 3916 Bronson Boulevard

City Kalamazoo State MI Zip Code 49008

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

Name of Employer Grand Rapids Community College Occupation Adjunct Faculty

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 11 / 28 / 2014
Transaction ID : 4228850

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00

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 706 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Elizabeth Hawkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 3916 Bronson Boulevard
 City Kalamazoo State MI Zip Code 49008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Grand Rapids Community College Occupation Adjunct Faculty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 12 / 12 / 2014
Transaction ID : 4235687
 Amount of Each Receipt this Period
 10.00

B. Ms. Elizabeth Hawkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 3916 Bronson Boulevard
 City Kalamazoo State MI Zip Code 49008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Grand Rapids Community College Occupation Adjunct Faculty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 12 / 28 / 2014
Transaction ID : 4241207
 Amount of Each Receipt this Period
 10.00

C. Daniele Hawkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 3800 S. Ocean Drive 6 Apt. 1616
 City Hollywood State FL Zip Code 33019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 11 / 30 / 2014
Transaction ID : 4229611
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 707 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Daniele Hawkins		Date of Receipt
Mailing Address 3800 S. Ocean Drive 6 Apt. 1616		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hollywood	FL	33019
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="205.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="35.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Dawna Hawksworth		Date of Receipt
Mailing Address 1140 South 9th St		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
San Jose	CA	95112
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Dawna Hawksworth		Date of Receipt
Mailing Address 1140 South 9th St		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
San Jose	CA	95112
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="85.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 708 OF 2648
	<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)
EMILY's List

A. Mr. David L. Hawley
Full Name (Last, First, Middle Initial)

Mailing Address 604 Cabana Lane

City Lake Oswego State OR Zip Code 97034

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

Name of Employer Self Occupation Cosultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **339.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : 4238597

Amount of Each Receipt this Period
50.00

B. Ms. Kathleen Haydel
Full Name (Last, First, Middle Initial)

Mailing Address 1696 Sandyrock Lane

City San Jose State CA Zip Code 95125

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **265.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014

Transaction ID : 4235775

Amount of Each Receipt this Period
35.00

C. Dr. Elizabeth T. Hayes
Full Name (Last, First, Middle Initial)

Mailing Address 7774 McDermott Rd.

City Manlius State NY Zip Code 13104

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

Name of Employer Le Moyne College Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2014

Transaction ID : 4238191

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **110.00**

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 709 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Cecil E. Hayes

Mailing Address 5229 Ivanhoe Place NE

City State Zip Code
Seattle WA 98105

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

Name of Employer Occupation
University Of Washington Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
12 / 16 / 2014
Transaction ID : 4237044

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
B. Cecil E. Hayes

Mailing Address 5229 Ivanhoe Place NE

City State Zip Code
Seattle WA 98105

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

Name of Employer Occupation
University Of Washington Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
12 / 10 / 2014
Transaction ID : 4234485

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Dr. William Hayes

Mailing Address 1209 N Gretchen Ln.

City State Zip Code
Wichita KS 67206

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

Name of Employer Occupation
Requested Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239685

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

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 710 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Barbara Hayler

Mailing Address 929 W Foster Ave. Apt. 1202

City Chicago State IL Zip Code 60640

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227698

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Joanne A. Hayne

Mailing Address 832 149th St. SE

City Mill Creek State WA Zip Code 98012

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
316.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231519

Amount of Each Receipt this Period
38.00

Full Name (Last, First, Middle Initial)
C. Ms. Evelyn Bernice Haynes

Mailing Address 2303 Owens Ave. Unit 101

City Fort Collins State CO Zip Code 80528

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 ▼
395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234103

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 163.00

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 711 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Evan J. Hazard
 Full Name (Last, First, Middle Initial)
 Mailing Address 3119 Apple Tree Ct NW
 City Bemidji State MN Zip Code 56601
 Date of Receipt: 12 / 05 / 2014
Transaction ID : 4232775
 Amount of Each Receipt this Period: 80.00
 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: 1060.00

B. Ms. Ruth V. Hazzard
 Full Name (Last, First, Middle Initial)
 Mailing Address 235a Pine St
 City Amherst State MA Zip Code 01002
 Date of Receipt: 12 / 15 / 2014
Transaction ID : 4236720
 Amount of Each Receipt this Period: 20.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Umass Amherst Occupation: Eudcator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 275.00

C. Ms. Anne L. Hearn
 Full Name (Last, First, Middle Initial)
 Mailing Address 3908 Coventryville Road
 City Pottstown State PA Zip Code 19465
 Date of Receipt: 12 / 23 / 2014
Transaction ID : 4239573
 Amount of Each Receipt this Period: 250.00
 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: 600.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
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 712 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Mr. Curtis Heaston
 Full Name (Last, First, Middle Initial)
 Mailing Address 520 N. Kingsbury St., Unit 2710
 City Chicago State IL Zip Code 60654
 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 ▼ 450.00

Date of Receipt
 12 / 09 / 2014
Transaction ID : 4234317
 Amount of Each Receipt this Period
 200.00

B. Ms. Anna Heath-Delaney
 Full Name (Last, First, Middle Initial)
 Mailing Address 755 Everett Street
 City El Cerrito State CA Zip Code 94530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kaiser Permanente Division Of Research Occupation Research Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4244801
 Amount of Each Receipt this Period
 20.00

C. Ms. Anna Heath-Delaney
 Full Name (Last, First, Middle Initial)
 Mailing Address 755 Everett Street
 City El Cerrito State CA Zip Code 94530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kaiser Permanente Division Of Research Occupation Research Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236691
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 245.00
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 713 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anna Heath-Delaney			Date of Receipt 12 / 19 / 2014 Transaction ID : 4238599
Mailing Address 755 Everett Street			Amount of Each Receipt this Period 25.00
City El Cerrito	State CA	Zip Code 94530	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 590.00
Name of Employer Kaiser Permanente Division Of Research	Occupation Research Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 590.00		

Full Name (Last, First, Middle Initial) B. Ms. Ann Marie Hebert			Date of Receipt 12 / 19 / 2014 Transaction ID : 4238601
Mailing Address 555 Esplanade #416			Amount of Each Receipt this Period 15.00
City Redondo Beach	State CA	Zip Code 90277	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 235.00
Name of Employer None	Occupation College Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		

Full Name (Last, First, Middle Initial) C. Ms. Ann Marie Hebert			Date of Receipt 12 / 05 / 2014 Transaction ID : 4232599
Mailing Address 555 Esplanade #416			Amount of Each Receipt this Period 25.00
City Redondo Beach	State CA	Zip Code 90277	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 235.00
Name of Employer None	Occupation College Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 714 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Ms. Lana Heckenberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 16536 Bolsena Dr
 City Montverde State FL Zip Code 34756
 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 ▼ 550.00

Date of Receipt
 12 / 18 / 2014
Transaction ID : 4238133
 Amount of Each Receipt this Period
 50.00

B. Ms. Yvonne Hedman
 Full Name (Last, First, Middle Initial)
 Mailing Address 5263 Union Ct Unit 6
 City Arvada State CO Zip Code 80002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231052
 Amount of Each Receipt this Period
 25.00

C. Dr. Britt Hedman
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 Peter Couatts Cir.
 City Stanford State CA Zip Code 94305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
 12 / 23 / 2014
Transaction ID : 4239506
 Amount of Each Receipt this Period
 1200.00

SUBTOTAL of Receipts This Page (optional).....▶	1275.00
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 715 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Leslie Hefner		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2014 Transaction ID : 4242544
Mailing Address 201 Kendal Drive		Amount of Each Receipt this Period 200.00
City Oberlin	State OH	Zip Code 44074
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 ▼ 900.00	

Full Name (Last, First, Middle Initial) B. Dr. Elizabeth Hegeman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2014 Transaction ID : 4235487
Mailing Address 100 Riverside Dr 10c		Amount of Each Receipt this Period 50.00
City New York	State NY	Zip Code 10024
FEC ID number of contributing federal political committee. C		
Name of Employer John Jay College-Cuny	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) C. Mr. Steve Hegeman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2014 Transaction ID : 4243057
Mailing Address 1339 Old Oak Ln.		Amount of Each Receipt this Period 250.00
City Naples	State FL	Zip Code 34110
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 ▼ 750.00	

SUBTOTAL of Receipts This Page (optional).....▶	500.00
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 716 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kathy Heggemeier		Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227934
Mailing Address 603 N 22nd St		Amount of Each Receipt this Period 50.00
City Richmond	State VA	Zip Code 23223
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Nikki Heidepriem		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238602
Mailing Address 888 17th Street, N.W. Suite 800		Amount of Each Receipt this Period 500.00
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Political Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Erin J. Height		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239896
Mailing Address 104 Wild Primrose		Amount of Each Receipt this Period 25.00
City Placitas	State NM	Zip Code 87043
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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	575.00
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 717 OF 2648
	<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)
EMILY's List

A. Ms. Victoria A. Heil
Full Name (Last, First, Middle Initial)

Mailing Address 6130 S Mt Juliet Road

City Hermitage State TN Zip Code 37076

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 ▼
1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4239897

Amount of Each Receipt this Period
50.00

B. Dr. Marilyn Heins
Full Name (Last, First, Middle Initial)

Mailing Address 6530 N Longfellow Dr

City Tucson State AZ Zip Code 85718

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

Name of Employer Self Occupation Parenting Education/Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237814

Amount of Each Receipt this Period
15.00

C. Ms. Julie Heldman
Full Name (Last, First, Middle Initial)

Mailing Address 700 Haldeman Road

City Santa Monica State CA Zip Code 90402

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 ▼
1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4228854

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	165.00
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 718 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Julie Heldman
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 Haldeman Road
 City Santa Monica State CA Zip Code 90402
 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242090
 Amount of Each Receipt this Period
 100.00

B. Mr. Herbert Hellen
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 S Henry St Apt 308
 City Madison State WI Zip Code 53703
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234328
 Amount of Each Receipt this Period
 100.00

C. Mrs. Helen Heller
 Full Name (Last, First, Middle Initial)
 Mailing Address 3230 Downey Ave
 City Reno State NV Zip Code 89503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Not Employed
 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
 11 / 30 / 2014
Transaction ID : 4229525
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	210.00
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 719 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Helen Heller
 Full Name (Last, First, Middle Initial)
 Mailing Address 3230 Downey Ave
 City Reno State NV Zip Code 89503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 12 / 05 / 2014
Transaction ID : 4232794
 Amount of Each Receipt this Period
 10.00

B. Mrs. Helen Heller
 Full Name (Last, First, Middle Initial)
 Mailing Address 3230 Downey Ave
 City Reno State NV Zip Code 89503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 12 / 31 / 2014
Transaction ID : 4243035
 Amount of Each Receipt this Period
 10.00

C. Ms. Mary K. Heller
 Full Name (Last, First, Middle Initial)
 Mailing Address 603 W 21st St
 City Vancouver State WA Zip Code 98660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Peacehealth Occupation Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 11 / 28 / 2014
Transaction ID : 4228855
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 720 OF 2648
	<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)
EMILY's List

A. Ms. Mary K. Heller
Full Name (Last, First, Middle Initial)
Mailing Address 603 W 21st St
City Vancouver State WA Zip Code 98660
FEC ID number of contributing federal political committee. **C**
Name of Employer Peacehealth Occupation Nurse
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4242091
Amount of Each Receipt this Period
10.00

B. Ms. Lisa Helling
Full Name (Last, First, Middle Initial)
Mailing Address 6 Grove Ridge Ct.
City Rockville State MD Zip Code 20852
FEC ID number of contributing federal political committee. **C**
Name of Employer U.S. Department Of State Occupation Diplomat
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
12 / 31 / 2014
Transaction ID : 4243344
Amount of Each Receipt this Period
250.00

C. Ms. Bryna Hellmann
Full Name (Last, First, Middle Initial)
Mailing Address 225 Lincoln Way
City San Francisco State CA Zip Code 94122
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 4244802
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 285.00
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 721 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Mr. Leslie Hellnack
 Full Name (Last, First, Middle Initial)
 Mailing Address 45 Parker Street
 City Watertown State MA Zip Code 02472
 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 ▼ 262.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242598
 Amount of Each Receipt this Period
 50.00

B. Ms. Dorothy O. Helly
 Full Name (Last, First, Middle Initial)
 Mailing Address 91 Central Park W
 City New York State NY Zip Code 10023
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242092
 Amount of Each Receipt this Period
 20.00

C. Ann Helt
 Full Name (Last, First, Middle Initial)
 Mailing Address 424 57th
 City Downers Grove State IL Zip Code 60516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232615
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 722 OF 2648
	<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)
EMILY's List

A. Ann Helt
Full Name (Last, First, Middle Initial)
Mailing Address 424 57th
City Downers Grove State IL Zip Code 60516
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4234871
Amount of Each Receipt this Period 10.00

B. Bill Helwig
Full Name (Last, First, Middle Initial)
Mailing Address 10801 Lagrima De Oro Rd NE Apt 876
City Albuquerque State NM Zip Code 87111
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4231645
Amount of Each Receipt this Period 30.00

C. Jean Henderson
Full Name (Last, First, Middle Initial)
Mailing Address W4723 Pine Ct
City Elkhorn State WI Zip Code 53121
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 ▼ 275.00

Date of Receipt 12 / 08 / 2014
Transaction ID : 4233747
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 723 OF 2648
(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)
EMILY's List

A. Gloria Henderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2442 Chapel Hill Rd
 City Griffin State GA Zip Code 30224
 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 ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228856
 Amount of Each Receipt this Period
 10.00

B. Gloria Henderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2442 Chapel Hill Rd
 City Griffin State GA Zip Code 30224
 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 ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230009
 Amount of Each Receipt this Period
 10.00

C. Gloria Henderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2442 Chapel Hill Rd
 City Griffin State GA Zip Code 30224
 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 ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231789
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 724 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Gloria Henderson		Date of Receipt
Mailing Address 2442 Chapel Hill Rd		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City Griffin	State GA	Zip Code 30224
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4235967
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="480.00"/>		

Full Name (Last, First, Middle Initial) B. Gloria Henderson		Date of Receipt
Mailing Address 2442 Chapel Hill Rd		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City Griffin	State GA	Zip Code 30224
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4239898
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="480.00"/>		

Full Name (Last, First, Middle Initial) C. Gloria Henderson		Date of Receipt
Mailing Address 2442 Chapel Hill Rd		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Griffin	State GA	Zip Code 30224
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4242093
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="480.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 725 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Barbara Hendricksen
 Full Name (Last, First, Middle Initial)
 Mailing Address 10520 Old Eagle River Road
 City Eagle River State AK Zip Code 99577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Writer/Researcher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235484
 Amount of Each Receipt this Period
 50.00

B. Ms. Ruth A. Hendrickson
 Full Name (Last, First, Middle Initial)
 Mailing Address 253 Concord Rd
 City Lincoln State MA Zip Code 01773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227936
 Amount of Each Receipt this Period
 15.00

C. Ms. Ruth A. Hendrickson
 Full Name (Last, First, Middle Initial)
 Mailing Address 253 Concord Rd
 City Lincoln State MA Zip Code 01773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240696
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 726 OF 2648
	(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

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anne Hendrickson		Date of Receipt
Mailing Address 2221 E. 4 St		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Duluth MN 55812		Transaction ID : 4228857
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="685.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Anne Hendrickson		Date of Receipt
Mailing Address 2221 E. 4 St		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Duluth MN 55812		Transaction ID : 4242094
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="685.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Anne Hendrickson		Date of Receipt
Mailing Address 2221 E. 4 St		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City State Zip Code Duluth MN 55812		Transaction ID : 4232145
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="685.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="65.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 728 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Linda Henning
 Full Name (Last, First, Middle Initial)
 Mailing Address 12958 Carmel Creek Rd.
 City San Diego State CA Zip Code 92130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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 / 25 / 2014
Transaction ID : 4229775
 Amount of Each Receipt this Period
 50.00

B. Ms. Linda Henning
 Full Name (Last, First, Middle Initial)
 Mailing Address 12958 Carmel Creek Rd.
 City San Diego State CA Zip Code 92130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 26 / 2014
Transaction ID : 4240825
 Amount of Each Receipt this Period
 50.00

C. Tanya Henrie
 Full Name (Last, First, Middle Initial)
 Mailing Address 6187 South 1250 West
 City Salt Lake City State UT Zip Code 84123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238608
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 729 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sheila Henry		Date of Receipt 12 / 29 / 2014 Transaction ID : 4242628
Mailing Address 5004 Maynard St.		Amount of Each Receipt this Period 100.00
City San Diego	State CA	Zip Code 92122
FEC ID number of contributing federal political committee. C	Name of Employer Self	
Occupation Counselor		Aggregate Year-to-Date 950.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Kae Hensey		Date of Receipt 12 / 18 / 2014 Transaction ID : 4238127
Mailing Address 2448 NW Westover Road		Amount of Each Receipt this Period 100.00
City Portland	State OR	Zip Code 97210
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation None		Aggregate Year-to-Date 1075.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Janice J. Herdey		Date of Receipt 11 / 28 / 2014 Transaction ID : 4228861
Mailing Address 251 W. Tuna Dr.		Amount of Each Receipt this Period 25.00
City Green Valley	State AZ	Zip Code 85614
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation None		Aggregate Year-to-Date 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 730 OF 2648
	<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

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)
EMILY's List

A. Ms. Janice J. Herdey
Full Name (Last, First, Middle Initial)
Mailing Address 251 W. Tuna Dr.
City Green Valley State AZ Zip Code 85614
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4242097
Amount of Each Receipt this Period
250.00

B. Ms. Helen Herget
Full Name (Last, First, Middle Initial)
Mailing Address 45 Hopson Ave. FL 1
City Branford State CT Zip Code 06405
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 ▼ 220.00

Date of Receipt
12 / 12 / 2014
Transaction ID : 4236031
Amount of Each Receipt this Period
20.00

C. Mr. Jack Herman
Full Name (Last, First, Middle Initial)
Mailing Address 3005 S. Leisure World Blvd.
Apt. 521
City Silver Spring State MD Zip Code 20906
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 455.00

Date of Receipt
11 / 28 / 2014
Transaction ID : 4228862
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 731 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Jack Herman		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241467
Mailing Address 3005 S. Leisure World Blvd. Apt. 521		Amount of Each Receipt this Period 25.00
City Silver Spring	State MD	Zip Code 20906
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00	

Full Name (Last, First, Middle Initial) B. Ms. Pauline A. Herr		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237886
Mailing Address 14 Thornhill Drive		Amount of Each Receipt this Period 100.00
City Pleasant Valley	State NY	Zip Code 12569
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 435.00	

Full Name (Last, First, Middle Initial) C. Ms. Phyllis J. Herrin		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232334
Mailing Address 31 Sand Lake Pl.		Amount of Each Receipt this Period 200.00
City Eustis	State FL	Zip Code 32726
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.00	

SUBTOTAL of Receipts This Page (optional).....▶	325.00
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 732 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Edith C. Herron		Date of Receipt
Mailing Address 36 Park Ave		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Rehoboth Beach	DE	19971
FEC ID number of contributing federal political committee.		Transaction ID : 4232916
Name of Employer		Amount of Each Receipt this Period
N/A		<input type="text" value="350.00"/>
Occupation		
Requested		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="520.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Judy Hershkowitz		Date of Receipt
Mailing Address 4406 Longfellow Street		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hyattsville	MD	20781
FEC ID number of contributing federal political committee.		Transaction ID : 4228863
Name of Employer		Amount of Each Receipt this Period
None		<input type="text" value="10.00"/>
Occupation		
Retired		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="360.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Judy Hershkowitz		Date of Receipt
Mailing Address 4406 Longfellow Street		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hyattsville	MD	20781
FEC ID number of contributing federal political committee.		Transaction ID : 4228864
Name of Employer		Amount of Each Receipt this Period
None		<input type="text" value="10.00"/>
Occupation		
Retired		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="360.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="55.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 733 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Judy Hershkowitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 4406 Longfellow Street
 City Hyattsville State MD Zip Code 20781
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231858
 Amount of Each Receipt this Period
 10.00

B. Ms. Judy Hershkowitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 4406 Longfellow Street
 City Hyattsville State MD Zip Code 20781
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241468
 Amount of Each Receipt this Period
 10.00

C. Ms. Judy Hershkowitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 4406 Longfellow Street
 City Hyattsville State MD Zip Code 20781
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241715
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 734 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Winifred L. Hess		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2014
Mailing Address 1620 Le Roy Ave		Transaction ID : 4239331
City Berkeley	State CA	Zip Code 94709
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 25.00
Name of Employer None	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Mrs. Winifred L. Hess		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2014
Mailing Address 1620 Le Roy Ave		Transaction ID : 4242803
City Berkeley	State CA	Zip Code 94709
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00
Name of Employer None	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Dr. Joseph W. Hess		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 2317 Sapphire Ln		Transaction ID : 4228865
City East Lansing	State MI	Zip Code 48823
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 15.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 735 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Joseph W. Hess
 Full Name (Last, First, Middle Initial)
 Mailing Address 2317 Sapphire Ln
 City East Lansing State MI Zip Code 48823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 12 / 28 / 2014
Transaction ID : 4241716
 Amount of Each Receipt this Period
 15.00

B. Dr. Joseph W. Hess
 Full Name (Last, First, Middle Initial)
 Mailing Address 2317 Sapphire Ln
 City East Lansing State MI Zip Code 48823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231863
 Amount of Each Receipt this Period
 20.00

C. Mr. Hamilton Hess
 Full Name (Last, First, Middle Initial)
 Mailing Address 255 Ursuline Road
 City Santa Rosa State CA Zip Code 95403
 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 ▼ 300.00

Date of Receipt
 12 / 13 / 2014
Transaction ID : 4236274
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 736 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Hamilton Hess		Date of Receipt
Mailing Address 255 Ursuline Road		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Santa Rosa	CA	95403
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4228866
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. Hamilton Hess		Date of Receipt
Mailing Address 255 Ursuline Road		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Santa Rosa	CA	95403
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4242098
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Hillary Hess		Date of Receipt
Mailing Address 415 N Norwood St		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Arlington	VA	22203
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4236692
Name of Employer	Occupation	Amount of Each Receipt this Period
US Dept of Commerce	POLICY ANALYST	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="55.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 737 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Thomas Hessman
 Full Name (Last, First, Middle Initial)
 Mailing Address 239 Spring St. Apt A12
 City State Zip Code
 Red Bank NJ 07701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Counter Hack Challenges Senior Technical Analyst
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2014
Transaction ID : 4240277
 Amount of Each Receipt this Period
 250.00

B. Ms. Dora Hetrick
 Full Name (Last, First, Middle Initial)
 Mailing Address 234 Rumsey Ave.
 City State Zip Code
 Lansing MI 48912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Not Employed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236275
 Amount of Each Receipt this Period
 20.00

C. Ms. Marjorie Heumann
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Baldwin Ave
 City State Zip Code
 San Mateo CA 94401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233078
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 470.00
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 738 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
EMILY's List

A. Ms. Marlene Heytvelt
 Full Name (Last, First, Middle Initial)
 Mailing Address 9796 Harper Hill Rd. SE
 City Port Orchard State WA Zip Code 98366
 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 ▼ 300.00

Date of Receipt
 12 / 05 / 2014
Transaction ID : 4232389
 Amount of Each Receipt this Period
 25.00

B. Ms. Helene Hibbard
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 Guildswood
 City Tuscaloosa State AL Zip Code 35401
 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 ▼ 1450.00

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4233777
 Amount of Each Receipt this Period
 200.00

C. Mr. Richard Hickman
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 Driftwood Drive
 City Seabrook State TX Zip Code 77586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 12 / 20 / 2014
Transaction ID : 4239265
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 739 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Nancy Hicks
 Full Name (Last, First, Middle Initial)
 Mailing Address 2500 Virginia Avenue NW
 City Washington State DC Zip Code 20037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ketchum, Inc Occupation Public Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 12 / 10 / 2014
Transaction ID : 4234320
 Amount of Each Receipt this Period 125.00

B. Ms. Liz Hicks
 Full Name (Last, First, Middle Initial)
 Mailing Address 5233 W First
 City Wichita State KS Zip Code 67212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4234864
 Amount of Each Receipt this Period 30.00

C. Janet Hiebert
 Full Name (Last, First, Middle Initial)
 Mailing Address 8214 Holly Road
 City Brentwood State TN Zip Code 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vanderbilt University Medical Center Occupation Research Associate/Rn
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4235103
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00
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 740 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anne H Hiemstra		Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236276
Mailing Address 26782 Holly Hill		Amount of Each Receipt this Period 20.00
City Farmington Hills	State MI	Zip Code 48334
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 ▼ 340.00	

Full Name (Last, First, Middle Initial) B. Carla Higgins		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228869
Mailing Address 2130 Dakar Place		Amount of Each Receipt this Period 25.00
City Dulles	State VA	Zip Code 20189
FEC ID number of contributing federal political committee. C		
Name of Employer Department Of State	Occupation Foreign Service Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2035.00	

Full Name (Last, First, Middle Initial) C. Carla Higgins		Date of Receipt M M / D D / Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230146
Mailing Address 2130 Dakar Place		Amount of Each Receipt this Period 25.00
City Dulles	State VA	Zip Code 20189
FEC ID number of contributing federal political committee. C		
Name of Employer Department Of State	Occupation Foreign Service Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2035.00	

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 741 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Carla Higgins
 Full Name (Last, First, Middle Initial)
 Mailing Address 2130 Dakar Place
 City Dulles State VA Zip Code 20189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Department Of State Occupation Foreign Service Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2035.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228378
 Amount of Each Receipt this Period
 35.00

B. Carla Higgins
 Full Name (Last, First, Middle Initial)
 Mailing Address 2130 Dakar Place
 City Dulles State VA Zip Code 20189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Department Of State Occupation Foreign Service Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2035.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237145
 Amount of Each Receipt this Period
 50.00

C. Maggie Higgins
 Full Name (Last, First, Middle Initial)
 Mailing Address 6537 Robinswood St.
 City Portage State MI Zip Code 49024
 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 ▼ 215.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231938
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 742 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Darlene R. Higgins		Date of Receipt
Mailing Address 211 W. Petoskey Street		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Gaylord MI 49735		Transaction ID : 4227682
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
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 ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Cheryl L. Hiipakka		Date of Receipt
Mailing Address 5487 S. Cornell Ave		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Chicago IL 60615		Transaction ID : 4227939
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
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 ▼ <input type="text" value="1225.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Cheryl L. Hiipakka		Date of Receipt
Mailing Address 5487 S. Cornell Ave		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Chicago IL 60615		Transaction ID : 4240860
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
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 ▼ <input type="text" value="1225.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 743 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Clark Hilden		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014
Mailing Address 207 NW Ellise Ave.		Transaction ID : 4237430
City Pendleton	State OR	Zip Code 97801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Barbara J. Hill		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2014
Mailing Address 25 Joralemon Street Apt. #5		Transaction ID : 4239389
City Brooklyn	State NY	Zip Code 11201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
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 ▼ 2700.00	

Full Name (Last, First, Middle Initial) C. Janet Hill		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 67 Shearer Road		Transaction ID : 4228871
City Washington	State CT	Zip Code 06793
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Town Of Washington	Occupation Land Use Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional).....▶	1310.00
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 744 OF 2648
	<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)
EMILY's List

A. Janet Hill
Full Name (Last, First, Middle Initial)
Mailing Address 67 Shearer Road
City Washington State CT Zip Code 06793
FEC ID number of contributing federal political committee. **C**
Name of Employer Town Of Washington Occupation Land Use Administrator
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **215.00**

Date of Receipt **12 / 28 / 2014**
Transaction ID : 4242101
Amount of Each Receipt this Period **10.00**

B. Ms. Wendy C. Hillhouse
Full Name (Last, First, Middle Initial)
Mailing Address 155 Westgate St.
City Redwood City State CA Zip Code 94062
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt **12 / 02 / 2014**
Transaction ID : 4231056
Amount of Each Receipt this Period **200.00**

C. Mr. Donald Rand Hillier
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 246
City Poulsbo State WA Zip Code 98370
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 **500.00**

Date of Receipt **12 / 05 / 2014**
Transaction ID : 4232300
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **310.00**
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 745 OF 2648
	<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)
EMILY's List

A. Ms. Jennifer A. Hillman
Full Name (Last, First, Middle Initial)

Mailing Address 4719 Sedgwick St, NW

City Washington	State DC	Zip Code 20016
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FEC ID number of contributing federal political committee. **C**

Name of Employer Cassidy Levy Kent	Occupation Lawyer
---------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	04	/	2014

Transaction ID : 4233989

Amount of Each Receipt this Period
100.00

B. Mr. Robert Himler
Full Name (Last, First, Middle Initial)

Mailing Address 7826 Wind Key Drive

City Boca Raton	State FL	Zip Code 33434
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	23	/	2014

Transaction ID : 4239565

Amount of Each Receipt this Period
100.00

C. Mr. Young Hines
Full Name (Last, First, Middle Initial)

Mailing Address 6 Leigh Dr.

City Ocean Pines	State MD	Zip Code 21811
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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

M M	/	D D	/	Y Y Y Y
12	/	02	/	2014

Transaction ID : 4231058

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional).....▶	235.00
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 746 OF 2648
	<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)
EMILY's List

A. Ms. Mary L. Hinkle
Full Name (Last, First, Middle Initial)
Mailing Address 49 Tortuga Cay
City Aliso Viejo State CA Zip Code 92656
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 ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 19 / 2014
Transaction ID : 4238613
Amount of Each Receipt this Period
30.00

B. Ms. Ann Hinkle
Full Name (Last, First, Middle Initial)
Mailing Address 3215 Martina Ct
City North Fort Myers State FL Zip Code 33917
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 ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228872
Amount of Each Receipt this Period
50.00

C. Ms. Ann Hinkle
Full Name (Last, First, Middle Initial)
Mailing Address 3215 Martina Ct
City North Fort Myers State FL Zip Code 33917
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 ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4242102
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 747 OF 2648
	<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)
EMILY's List

A. Ms. Jeanne B. Hirshfield
Full Name (Last, First, Middle Initial)

Mailing Address 36468 Sandsal Circle

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235227

Amount of Each Receipt this Period
 100.00

B. Mr. David R. Hirst
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 898

City Tacoma State WA Zip Code 98401

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 ▼ 368.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238614

Amount of Each Receipt this Period
 50.00

C. Mr. George A. Hisert
Full Name (Last, First, Middle Initial)

Mailing Address 454 Cragmont Avenue

City Berkeley State CA Zip Code 94708

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

Name of Employer N/A Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231059

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 748 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Virginia Sterry Hislop		Date of Receipt
Mailing Address 343 N 23rd Ave		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Yakima	WA	98902
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4230512
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="764.00"/>	

Full Name (Last, First, Middle Initial) B. Edward Hitchcock		Date of Receipt
Mailing Address 3008 E. Daniel St.		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bloomington	IN	47401
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4233510
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="5.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="715.00"/>	

Full Name (Last, First, Middle Initial) C. Edward Hitchcock		Date of Receipt
Mailing Address 3008 E. Daniel St.		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bloomington	IN	47401
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4234939
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="5.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="715.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="160.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 749 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Edward Hitchcock
 Full Name (Last, First, Middle Initial)
 Mailing Address 3008 E. Daniel St.
 City Bloomington State IN Zip Code 47401
 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 ▼ 715.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234106
 Amount of Each Receipt this Period
 50.00

B. Adalyn S. Hixson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1275 15th St.
 City Fort Lee State NJ Zip Code 07024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hispanic Outlook In Higher Education Occupation Editor
 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
 11 / 25 / 2014
Transaction ID : 4230113
 Amount of Each Receipt this Period
 30.00

C. Adalyn S. Hixson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1275 15th St.
 City Fort Lee State NJ Zip Code 07024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hispanic Outlook In Higher Education Occupation Editor
 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
 12 / 26 / 2014
Transaction ID : 4240741
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 750 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Victoria Hobbs
 Full Name (Last, First, Middle Initial)
 Mailing Address 3549 NW Astor St
 City Camas State WA Zip Code 98607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Vp Store Manager Macys
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **345.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239905
 Amount of Each Receipt this Period
25.00

B. Mr. Thomas Hocking
 Full Name (Last, First, Middle Initial)
 Mailing Address 2304 E. Tuscany Way
 City Appleton State WI Zip Code 54913
 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 ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234650
 Amount of Each Receipt this Period
100.00

C. Dr. Elizabeth Hodapp
 Full Name (Last, First, Middle Initial)
 Mailing Address 245 E Rivo Alto Dr
 City Miami Beach State FL Zip Code 33139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231060
 Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **325.00**
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 751 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Martha Hodge

Mailing Address 4141 Bayshore Blvd Unit 2101

City Tampa	State FL	Zip Code 33611
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4227350

Amount of Each Receipt this Period
50.00

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

Mailing Address 3546 Cromwell Street

City Jackson	State MS	Zip Code 39213
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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 ▼
683.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	30	/	2014

Transaction ID : 4242770

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Ms. Joan Daniel Hodges

Mailing Address 3825 Caruth Blvd.

City Dallas	State TX	Zip Code 75225
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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 ▼
1850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	02	/	2014

Transaction ID : 4244457

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 752 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan Daniel Hodges		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014
Mailing Address 3825 Caruth Blvd.		Transaction ID : 4236575
City Dallas	State TX	Zip Code 75225
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
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 ▼ 1850.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary S. Hodges		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 1219 N Boston Ave		Transaction ID : 4230210
City Deland	State FL	Zip Code 32724
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer semco	Occupation consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

Full Name (Last, First, Middle Initial) C. Margaret Hodgkins		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014
Mailing Address 2731 Shawn Dr		Transaction ID : 4237138
City Denison	State TX	Zip Code 75020
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
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 ▼ 325.00	

SUBTOTAL of Receipts This Page (optional).....▶	310.00
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 753 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Janet Hodgkinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 956 Carson Dr
 City Sunnyvale State CA Zip Code 94086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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
 12 / 03 / 2014
Transaction ID : 4231589
 Amount of Each Receipt this Period
 15.00

B. Ms. Patricia Hodgson
 Full Name (Last, First, Middle Initial)
 Mailing Address 107 Paddock Drive
 'Hunter's Ridge'
 City Breckenridge State CO Zip Code 80424
 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236278
 Amount of Each Receipt this Period
 20.00

C. Ms. Ruth Hoffman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3910 Warner St
 City Kensington State MD Zip Code 20895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236774
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
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 754 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Kathy Hoffman
 Full Name (Last, First, Middle Initial)
 Mailing Address 307 Palo Verde Way
 City Vallejo State CA Zip Code 94589
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4235168
 Amount of Each Receipt this Period
 25.00

B. Ms. Alexandra Hoffman
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 East 87th Street
 City New York State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Freelance Writer/Editor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242103
 Amount of Each Receipt this Period
 20.00

C. Ms. Kathleen Hoffman-Krause
 Full Name (Last, First, Middle Initial)
 Mailing Address 4717 South Chelsea Lane
 City Bethesda State MD Zip Code 20814
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236553
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 755 OF 2648
	<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)
EMILY's List

A. Dr. Margaret Hogan
Full Name (Last, First, Middle Initial)
Mailing Address 9434 N 125th PI

City Scottsdale	State AZ	Zip Code 85259
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
261.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	26	/	2014

Transaction ID : 4227941

Amount of Each Receipt this Period
20.00

B. Dr. Margaret Hogan
Full Name (Last, First, Middle Initial)
Mailing Address 9434 N 125th PI

City Scottsdale	State AZ	Zip Code 85259
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
261.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240789

Amount of Each Receipt this Period
20.00

C. Charles Hogg
Full Name (Last, First, Middle Initial)
Mailing Address 117 Waters Edge Dr

City Eatonton	State GA	Zip Code 31024
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FEC ID number of contributing federal political committee. **C**

Name of Employer Bechtel	Occupation Engineer
-----------------------------	------------------------

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
12	/	23	/	2014

Transaction ID : 4239910

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....	65.00
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 756 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Venetia Holland
 Full Name (Last, First, Middle Initial)
 Mailing Address 526 Allegheny Avenue
 City Towson State MD Zip Code 21204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Coldwell Banker Occupation Realtor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4239066
 Amount of Each Receipt this Period
 20.00

B. Ms. Sheila Holland-Blake
 Full Name (Last, First, Middle Initial)
 Mailing Address 526 Allegheny Avenue
 City Towson State MD Zip Code 21204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Coldwell Banker Occupation Realtor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235686
 Amount of Each Receipt this Period
 30.00

C. Linda Hollett
 Full Name (Last, First, Middle Initial)
 Mailing Address 7216 Ward Pkwy.
 City Kansas City State MO Zip Code 64114
 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 ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239912
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 758 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Marilyn P. Hollinshead		Date of Receipt 12 / 02 / 2014 Transaction ID : 4231460
Mailing Address PO Box 3000-3122		Amount of Each Receipt this Period 150.00
City Wes Tisbury	State MA	Zip Code 02575
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
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 ▼ 650.00	

Full Name (Last, First, Middle Initial) B. Marianne Holloran		Date of Receipt 12 / 19 / 2014 Transaction ID : 4238618
Mailing Address 5268 NW 78th Ct. N/A		Amount of Each Receipt this Period 35.00
City Ocala	State FL	Zip Code 34482
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. David Holloway		Date of Receipt 12 / 05 / 2014 Transaction ID : 4232644
Mailing Address 1420 Don Gaspar Ave		Amount of Each Receipt this Period 50.00
City Santa Fe	State NM	Zip Code 87505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
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 ▼ 210.00	

SUBTOTAL of Receipts This Page (optional).....▶	235.00
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 759 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judy Holloway		Date of Receipt
Mailing Address 3500 Greystone Drive		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City Austin	State TX	Zip Code 78731
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4232491
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="215.00"/>		

Full Name (Last, First, Middle Initial) B. Ms. Peggy Holman		Date of Receipt
Mailing Address 15347 SE 49th Pl		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City Bellevue	State WA	Zip Code 98006
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4238619
Name of Employer Open Circle Company		Amount of Each Receipt this Period
Occupation Consultant		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="850.00"/>		

Full Name (Last, First, Middle Initial) C. Ms. Peggy Holman		Date of Receipt
Mailing Address 15347 SE 49th Pl		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City Bellevue	State WA	Zip Code 98006
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4242790
Name of Employer Open Circle Company		Amount of Each Receipt this Period
Occupation Consultant		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="850.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="210.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 760 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Janet Holmes
 Full Name (Last, First, Middle Initial)
 Mailing Address 412 S 13th St Apt 411
 City State Zip Code
 Boise ID 83702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Boise State University Professor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 203.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239160
 Amount of Each Receipt this Period
 15.00

B. Ms. Susan E. Holmes
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 West 63rd St
 City State Zip Code
 New York NY 10023
 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 ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238620
 Amount of Each Receipt this Period
 25.00

C. Mr. Thomas Holmes
 Full Name (Last, First, Middle Initial)
 Mailing Address 2537 Hawthorne Drive
 City State Zip Code
 Beloit WI 53511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227944
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 761 OF 2648
	<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)
EMILY's List

A. Frankie Ann Holmes
Full Name (Last, First, Middle Initial)
Mailing Address 4535 Birch St.
City Belleaire State TX Zip Code 77401
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2014
Transaction ID : 4243202
Amount of Each Receipt this Period 50.00

B. Ms. Janet L. Holmgren
Full Name (Last, First, Middle Initial)
Mailing Address 3262 Crane Way
City Oakland State CA Zip Code 94602
FEC ID number of contributing federal political committee. **C**
Name of Employer Universitynow Occupation Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 19 / 2014
Transaction ID : 4238621
Amount of Each Receipt this Period 25.00

C. Ms. Mary Holt
Full Name (Last, First, Middle Initial)
Mailing Address 23 North Rd
City Chebeague Island State ME Zip Code 04017
FEC ID number of contributing federal political committee. **C**
Name of Employer Cisd Occupation Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 28 / 2014
Transaction ID : 4228876
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 762 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Mary Holt

Mailing Address 23 North Rd

City Chebeague Island State ME Zip Code 04017

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

Name of Employer Cisd Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4242105

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Ms. Virginia L. Holten

Mailing Address 2247 Lone Oak Ln

City Vista State CA Zip Code 92084

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014

Transaction ID : 4232685

Amount of Each Receipt this Period
 15.00

Full Name (Last, First, Middle Initial)
C. Ms. Virginia L. Holten

Mailing Address 2247 Lone Oak Ln

City Vista State CA Zip Code 92084

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237726

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 763 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lynn M Hooker		Date of Receipt 12 / 15 / 2014 Transaction ID : 4244803
Mailing Address 1003 South Palmer Ave.		Amount of Each Receipt this Period 16.50
City Bloomington	State IN	Zip Code 47401
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 381.00	
Name of Employer Indiana University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Lynn M Hooker		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233447
Mailing Address 1003 South Palmer Ave.		Amount of Each Receipt this Period 25.00
City Bloomington	State IN	Zip Code 47401
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 381.00	
Name of Employer Indiana University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael R. Hooker		Date of Receipt 11 / 25 / 2014 Transaction ID : 4230148
Mailing Address 304 Victory Lane		Amount of Each Receipt this Period 25.00
City Mansfield	State TX	Zip Code 76063
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 325.00	
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	66.50
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 764 OF 2648
	<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)
EMILY's List

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

Mailing Address 304 Victory Lane

City Mansfield State TX Zip Code 76063

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 ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014

Transaction ID : 4239914

Amount of Each Receipt this Period
25.00

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

Mailing Address PO Box 1521

City Glenrock State WY Zip Code 82637

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

Name of Employer Converse County Library Occupation Library Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **254.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : 4229716

Amount of Each Receipt this Period
10.00

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

Mailing Address PO Box 1521

City Glenrock State WY Zip Code 82637

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

Name of Employer Converse County Library Occupation Library Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **254.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014

Transaction ID : 4240475

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **45.00**

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 765 OF 2648
	<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)
EMILY's List

A. Ms. Roberta Hopkins
Full Name (Last, First, Middle Initial)
Mailing Address 1811 7th Ave
City Sacramento State CA Zip Code 95818
FEC ID number of contributing federal political committee. **C**
Name of Employer Dept. Veterans Affairs Occupation Nurse
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
12 / 29 / 2014
Transaction ID : 4242466
Amount of Each Receipt this Period
250.00

B. Richard Horevitz
Full Name (Last, First, Middle Initial)
Mailing Address 664 N Raymond Ave
City Pasadena State CA Zip Code 91103
FEC ID number of contributing federal political committee. **C**
Name of Employer Paramount Physicians Occupation Psychologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 275.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228879
Amount of Each Receipt this Period
10.00

C. Richard Horevitz
Full Name (Last, First, Middle Initial)
Mailing Address 664 N Raymond Ave
City Pasadena State CA Zip Code 91103
FEC ID number of contributing federal political committee. **C**
Name of Employer Paramount Physicians Occupation Psychologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 275.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 15 / 2014
Transaction ID : 4236883
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 270.00
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 766 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Richard Horevitz		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
Mailing Address 664 N Raymond Ave		Transaction ID : 4242108
City Pasadena	State CA	Zip Code 91103
FEC ID number of contributing federal political committee.	C	
Name of Employer Paramount Physicians	Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	
		Amount of Each Receipt this Period 10.00

Full Name (Last, First, Middle Initial) B. Ms. Janice Horn		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2014
Mailing Address 32 Barber St		Transaction ID : 4239177
City Clarion	State PA	Zip Code 16214
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 ▼ 1210.00	
		Amount of Each Receipt this Period 25.00

Full Name (Last, First, Middle Initial) C. Ms. Janice Horn		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014
Mailing Address 32 Barber St		Transaction ID : 4231838
City Clarion	State PA	Zip Code 16214
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 ▼ 1210.00	
		Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 767 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Elaine Horowitz

Mailing Address 214 N Oakhurst Dr

City State Zip Code
Beverly Hills CA 90210

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

Name of Employer Occupation
REQUESTED REQUESTED

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
 12 / 18 / 2014
Transaction ID : 4244871

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Mr. Chris Horwitz

Mailing Address 2200 Beechwood

City State Zip Code
Pittsburgh PA 15217

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

Name of Employer Occupation
Electrogrip Ceo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4244760

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Ms. Wendy J. Hoskins

Mailing Address 454 W 153rd Street

City State Zip Code
New York NY 10031

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

Name of Employer Occupation
Bank Of America Project Administration

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
 12 / 20 / 2014
Transaction ID : 4239334

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

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 768 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marjorie L Hoskinson			Date of Receipt
Mailing Address 813 Old Farm Rd			<input type="text" value="12"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4240272
Thousand Oaks	CA	91360	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="35.00"/>
Name of Employer	Occupation		
Los Angeles Community College District	Teacher		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2800.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Marjorie L Hoskinson			Date of Receipt
Mailing Address 813 Old Farm Rd			<input type="text" value="12"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4240273
Thousand Oaks	CA	91360	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
Los Angeles Community College District	Teacher		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2800.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. John Hotchkiss			Date of Receipt
Mailing Address 131 Chestnut St.			<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4230517
Girard	PA	16417	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="60.00"/>
Name of Employer	Occupation		
None	Retired		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="315.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="145.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 769 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Susan Houchen
 Full Name (Last, First, Middle Initial)
 Mailing Address 780 Cornell Dr
 City Santa Clara State CA Zip Code 95051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nurse Practitioner Occupation Permanenter Med Gp (Kaiser)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4244736
 Amount of Each Receipt this Period
25.00

B. Ms. Judith Hourihan
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Trenton St
 City Charlestown State MA Zip Code 02129
 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 **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4236005
 Amount of Each Receipt this Period
25.00

C. Ms. Jane Houston
 Full Name (Last, First, Middle Initial)
 Mailing Address 1207 W. Fort Street, Apt. 111
 City Boise State ID Zip Code 83702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232813
 Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional).....	85.00
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 770 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Paul L. Hovsepien		Date of Receipt
Mailing Address 185 N Mountain Trl # B		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Sierra Madre	State CA	Zip Code 91024
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4228884
Name of Employer REQUESTED		Occupation REQUESTED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	Amount of Each Receipt this Period <input type="text" value="20.00"/>

Full Name (Last, First, Middle Initial) B. Mr. Paul L. Hovsepien		Date of Receipt
Mailing Address 185 N Mountain Trl # B		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Sierra Madre	State CA	Zip Code 91024
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4242111
Name of Employer REQUESTED		Occupation REQUESTED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	Amount of Each Receipt this Period <input type="text" value="20.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Beatrice Howard		Date of Receipt
Mailing Address 1320 Addison Street, Apt A410		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Berkeley	State CA	Zip Code 94702
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4229758
Name of Employer None		Occupation None
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="285.00"/>	Amount of Each Receipt this Period <input type="text" value="15.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="55.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 771 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Beatrice Howard
 Full Name (Last, First, Middle Initial)
 Mailing Address 1320 Addison Street, Apt A410
 City Berkeley State CA Zip Code 94702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239916
 Amount of Each Receipt this Period
 15.00

B. Ms. Margaret C. Howard
 Full Name (Last, First, Middle Initial)
 Mailing Address 3290 Brook Road
 City Highland Park State IL Zip Code 60035
 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 ▼ 238.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232235
 Amount of Each Receipt this Period
 25.00

C. Jacqueline Howard
 Full Name (Last, First, Middle Initial)
 Mailing Address 8001 E 11th Ave Unit 4312
 City Denver State CO Zip Code 80220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Shc Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227948
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 772 OF 2648
	<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)
EMILY's List

A. Ms. Katherine Howard
Full Name (Last, First, Middle Initial)
Mailing Address 33 Club Course Dr
City Hilton Head State SC Zip Code 29928
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 410.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231582
Amount of Each Receipt this Period
30.00

B. Rea Howarth
Full Name (Last, First, Middle Initial)
Mailing Address 1 Lazy Livin Ln
City Front Royal State VA Zip Code 22630
FEC ID number of contributing federal political committee. **C**
Name of Employer Dc Public Schools Occupation Teacher's Aide
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234225
Amount of Each Receipt this Period
15.00

C. Ms. B. J. Hoyt
Full Name (Last, First, Middle Initial)
Mailing Address 4304 Ulrich Way
City Sacramento State CA Zip Code 95822
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 ▼ 1550.00

Date of Receipt
12 / 18 / 2014
Transaction ID : 4238095
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
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 773 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Suzanne M Huard
 Full Name (Last, First, Middle Initial)
 Mailing Address 463 Portland Avenue
 City Rollinsford State NH Zip Code 03869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238627
 Amount of Each Receipt this Period
 10.00

B. Martha B. Hubbard
 Full Name (Last, First, Middle Initial)
 Mailing Address 61 Castle Hill Road
 City Pawcatuck State CT Zip Code 06379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ledyard Libraries Occupation Librarian
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243347
 Amount of Each Receipt this Period
 15.00

c. Martha B. Hubbard
 Full Name (Last, First, Middle Initial)
 Mailing Address 61 Castle Hill Road
 City Pawcatuck State CT Zip Code 06379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ledyard Libraries Occupation Librarian
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238628
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 774 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Unison Hubbard

Mailing Address 4220 Southpark Bluff Dr.

City	State	Zip Code
Anchorage	AK	99516

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

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014

Transaction ID : 4239517

Amount of Each Receipt this Period
140.00

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

Mailing Address 9200 Bustleton Ave Apt 1204

City	State	Zip Code
Philadelphia	PA	19115

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 ▼
220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014

Transaction ID : 4239917

Amount of Each Receipt this Period
5.00

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

Mailing Address 9200 Bustleton Ave Apt 1204

City	State	Zip Code
Philadelphia	PA	19115

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 ▼
220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : 4236653

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	155.00
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 775 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jeanne Huber		Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2014 Transaction ID : 4235173
Mailing Address 5341 Cove Garden Rd		Amount of Each Receipt this Period 259.00
City Covesville	State VA	Zip Code 22931
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation Retired		Aggregate Year-to-Date ▼ 1118.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Jean Hubinger		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238629
Mailing Address 837 NW 44th Street		Amount of Each Receipt this Period 50.00
City Oklahoma City	State OK	Zip Code 73118
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation Retired		Aggregate Year-to-Date ▼ 305.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Terry M. Hudson		Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240369
Mailing Address 490 Riverhill Drive NW		Amount of Each Receipt this Period 400.00
City Atlanta	State GA	Zip Code 30328
FEC ID number of contributing federal political committee. C	Name of Employer Requested	
Occupation Requested		Aggregate Year-to-Date ▼ 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	709.00
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 776 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Celeste Huecker
 Full Name (Last, First, Middle Initial)
 Mailing Address 5239 W Running Brook Rd
 Apt 202
 City Columbia State MD Zip Code 21044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232619
 Amount of Each Receipt this Period
 35.00

B. Nancy Hughes
 Full Name (Last, First, Middle Initial)
 Mailing Address 2373 Broadway #1528
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cuny Occupation Social Worker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241795
 Amount of Each Receipt this Period
 100.00

C. Ms. Lauri Hughes
 Full Name (Last, First, Middle Initial)
 Mailing Address 2121 4th St
 City Boulder State CO Zip Code 80302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation none
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237523
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	635.00
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 777 OF 2648
	<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)
EMILY's List

A. Mary Hughes
Full Name (Last, First, Middle Initial)

Mailing Address 9333 Framington Way

City Elk Grove State CA Zip Code 95758

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 ▼ **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014

Transaction ID : 4237783

Amount of Each Receipt this Period
250.00

B. Ms. L. Susan Hughes
Full Name (Last, First, Middle Initial)

Mailing Address 1747 W. Roosevelt Road Ste. 558

City Chicago State IL Zip Code 60608

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

Name of Employer University Of Il At Chicago Occupation Professor/Gerodtologist

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 / 25 / 2014

Transaction ID : 4227609

Amount of Each Receipt this Period
250.00

C. Mr. Bernard Hughes
Full Name (Last, First, Middle Initial)

Mailing Address 665 County Rd 450 E

City Norris City State IL Zip Code 62869

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2014

Transaction ID : 4233069

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... **375.00**

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 778 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jean Hulbert		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228886
Mailing Address 2820 Kelly Circle		Amount of Each Receipt this Period 19.00
City Manhattan	State KS	Zip Code 66502
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.00	

Full Name (Last, First, Middle Initial) B. Ms. Jean Hulbert		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242112
Mailing Address 2820 Kelly Circle		Amount of Each Receipt this Period 19.00
City Manhattan	State KS	Zip Code 66502
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.00	

Full Name (Last, First, Middle Initial) C. Ms. Marian L Hull		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2014 Transaction ID : 4242860
Mailing Address 529 Brend Road		Amount of Each Receipt this Period 35.00
City Rockville	State MD	Zip Code 20850
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 545.00	

SUBTOTAL of Receipts This Page (optional).....▶	73.00
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 779 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Joan Hull
 Full Name (Last, First, Middle Initial)
 Mailing Address 193 San Andreas Drive
 City Novato State CA Zip Code 94945
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234389
 Amount of Each Receipt this Period
 100.00

B. Ms. Carolyn E. Hulst
 Full Name (Last, First, Middle Initial)
 Mailing Address 121 Sorrento Dr.
 City Holland State MI Zip Code 49423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239103
 Amount of Each Receipt this Period
 50.00

C. Nancy Hume
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 Reading Way
 City Pleasant Hill State CA Zip Code 94523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236122
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	165.00
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 780 OF 2648
	<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)
EMILY's List

A. Mrs. Shirley J. Humphrey
 Full Name (Last, First, Middle Initial)
 Mailing Address 6000 Lake Rd W
 Apt. A112
 City Ashtabula State OH Zip Code 44004
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230521
 Amount of Each Receipt this Period
 50.00

B. Ms. Betty Cochran Hunt
 Full Name (Last, First, Middle Initial)
 Mailing Address 117 Shadylane Court
 City Roseville State CA Zip Code 95747
 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 ▼ 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228888
 Amount of Each Receipt this Period
 30.00

C. Ms. Betty Cochran Hunt
 Full Name (Last, First, Middle Initial)
 Mailing Address 117 Shadylane Court
 City Roseville State CA Zip Code 95747
 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 ▼ 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242114
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 781 OF 2648
	<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)
EMILY's List

A. Ms. Mary Anne Hunter
Full Name (Last, First, Middle Initial)

Mailing Address 22 S Front St
102

City Philadelphia State PA Zip Code 19106

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 ▼
445.00

Date of Receipt
12 / 02 / 2014
Transaction ID : 4233980

Amount of Each Receipt this Period
15.00

B. Mr. Richard Hunter
Full Name (Last, First, Middle Initial)

Mailing Address 1310 Birch Lane

City Wilmington State DE Zip Code 19809

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt
12 / 20 / 2014
Transaction ID : 4239072

Amount of Each Receipt this Period
30.00

C. Ms. Ann E. Hurmence
Full Name (Last, First, Middle Initial)

Mailing Address 1110 S Highway 80 Trlr 89

City Benson State AZ Zip Code 85602

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 ▼
350.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231996

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 782 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan Lee Husted		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2014
Mailing Address 1615 Wilder Ave		Transaction ID : 4235680
City Honolulu	State HI	Zip Code 96822
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	

Full Name (Last, First, Middle Initial) B. Ms. Joan Lee Husted		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014
Mailing Address 1615 Wilder Ave		Transaction ID : 4232796
City Honolulu	State HI	Zip Code 96822
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	

Full Name (Last, First, Middle Initial) C. Wilma Hutcheson-Williams		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014
Mailing Address 310 Lakeland Drive		Transaction ID : 4230030
City Athens	State GA	Zip Code 30607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Piedmont College	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 783 OF 2648
	<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)
EMILY's List

A. Wilma Hutcheson-Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 310 Lakeland Drive
 City Athens State GA Zip Code 30607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Piedmont College Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 12 / 26 / 2014
Transaction ID : 4240644
 Amount of Each Receipt this Period
 10.00

B. Wilma Hutcheson-Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 310 Lakeland Drive
 City Athens State GA Zip Code 30607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Piedmont College Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4232162
 Amount of Each Receipt this Period
 50.00

C. Raymah Hutchinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 127 Plain St
 City Easthampton State MA Zip Code 01027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Greenwood Music Camp Administration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 12 / 12 / 2014
Transaction ID : 4235689
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 784 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Raymah Hutchinson		Date of Receipt 12 / 19 / 2014 Transaction ID : 4238633
Mailing Address 127 Plain St		Amount of Each Receipt this Period 15.00
City Easthampton	State MA	Zip Code 01027
FEC ID number of contributing federal political committee. C		
Name of Employer Greenwood Music Camp	Occupation Administration	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) B. Ms. Maryann Hutchison		Date of Receipt 12 / 05 / 2014 Transaction ID : 4232667
Mailing Address 464 35TH Street		Amount of Each Receipt this Period 30.00
City Manhattan Beach	State CA	Zip Code 90266
FEC ID number of contributing federal political committee. C		
Name of Employer The Aerospace Corporation	Occupation Sr. Eng. Project Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	

Full Name (Last, First, Middle Initial) C. Ms. Maryann Hutchison		Date of Receipt 12 / 19 / 2014 Transaction ID : 4238634
Mailing Address 464 35TH Street		Amount of Each Receipt this Period 30.00
City Manhattan Beach	State CA	Zip Code 90266
FEC ID number of contributing federal political committee. C		
Name of Employer The Aerospace Corporation	Occupation Sr. Eng. Project Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 785 OF 2648
	<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)
EMILY's List

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

Mailing Address 1207 Kenwood Ave

City Fort Wayne State IN Zip Code 46805

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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014

Transaction ID : 4233149

Amount of Each Receipt this Period
 40.00

B. Mrs. Lois G. Hybl
Full Name (Last, First, Middle Initial)

Mailing Address 4107 Westview Road

City Baltimore State MD Zip Code 21218

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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014

Transaction ID : 4231916

Amount of Each Receipt this Period
 10.00

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

Mailing Address 8132 N 75th Street

City Scottsdale State AZ Zip Code 85258

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

Name of Employer Southwest Kidney Institute Occupation Physician

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
 12 / 18 / 2014

Transaction ID : 4238189

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 786 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. William Hyder
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 E. Siena Heights Dr
 City State Zip Code
 Adrian MI 49221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228426
 Amount of Each Receipt this Period
 15.00

B. Mr. William Hyder
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 E. Siena Heights Dr
 City State Zip Code
 Adrian MI 49221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242432
 Amount of Each Receipt this Period
 15.00

c. Nancy Hylbert
 Full Name (Last, First, Middle Initial)
 Mailing Address 2160 Erb Rd
 City State Zip Code
 Verona WI 53593
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Innkeeper/Owner Of Springdale Inn
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 890.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228891
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 787 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Nancy Hylbert		Date of Receipt 12 / 28 / 2014 Transaction ID : 4242116
Mailing Address 2160 Erb Rd		Amount of Each Receipt this Period 25.00
City Verona	State WI	Zip Code 53593
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 890.00
Name of Employer Self	Occupation Innkeeper/Owner Of Springdale Inn	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 890.00	

Full Name (Last, First, Middle Initial) B. Nancy Hylbert		Date of Receipt 12 / 06 / 2014 Transaction ID : 4232532
Mailing Address 2160 Erb Rd		Amount of Each Receipt this Period 35.00
City Verona	State WI	Zip Code 53593
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 890.00
Name of Employer Self	Occupation Innkeeper/Owner Of Springdale Inn	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 890.00	

Full Name (Last, First, Middle Initial) C. Valerie Hyman		Date of Receipt 11 / 25 / 2014 Transaction ID : 4230064
Mailing Address 238 - 62nd Ave South		Amount of Each Receipt this Period 15.00
City St Petersburg	State FL	Zip Code 33705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 215.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 788 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Valerie Hyman		Date of Receipt 12 / 26 / 2014 Transaction ID : 4240692
Mailing Address 238 - 62nd Ave South		Amount of Each Receipt this Period 15.00
City St Petersburg	State FL	Zip Code 33705
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

Full Name (Last, First, Middle Initial) B. Ms. Claire Hyman		Date of Receipt 12 / 03 / 2014 Transaction ID : 4231687
Mailing Address 739 Harvard Ave		Amount of Each Receipt this Period 100.00
City Saint Louis	State MO	Zip Code 63130
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 ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Christine Ilich		Date of Receipt 12 / 05 / 2014 Transaction ID : 4232793
Mailing Address 2567 Ashby Station Road		Amount of Each Receipt this Period 20.00
City Front Royal	State VA	Zip Code 22630
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Chef	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 789 OF 2648
	<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)
EMILY's List

A. Mary Ellen Imlay
Full Name (Last, First, Middle Initial)

Mailing Address 4040 E. Brookhaven Drive

City Atlanta State GA Zip Code 30319

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

Name of Employer Self-Employed Occupation President, The Imlay Foundation, Inc.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4231959

Amount of Each Receipt this Period 200.00

B. Ms. Sonia Immasche
Full Name (Last, First, Middle Initial)

Mailing Address 730 Cottonwood Drive

City Fort Collins State CO Zip Code 80524

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

Name of Employer None Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1070.00

Date of Receipt 11 / 30 / 2014
Transaction ID : 4229656

Amount of Each Receipt this Period 10.00

C. Ms. Sonia Immasche
Full Name (Last, First, Middle Initial)

Mailing Address 730 Cottonwood Drive

City Fort Collins State CO Zip Code 80524

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

Name of Employer None Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1070.00

Date of Receipt 12 / 05 / 2014
Transaction ID : 4232637

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 790 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sonia Immasche		Date of Receipt
Mailing Address 730 Cottonwood Drive		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Fort Collins	CO	80524
FEC ID number of contributing federal political committee.		Transaction ID : 4238635
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1070.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Lisa Ingall		Date of Receipt
Mailing Address 300 Burr Oak Dr		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
Ann Arbor	MI	48103
FEC ID number of contributing federal political committee.		Transaction ID : 4244903
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Ibm	Project Manager	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Sandra Ingle		Date of Receipt
Mailing Address 21417 Toll Gate Road		<input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
Saratoga	CA	95070
FEC ID number of contributing federal political committee.		Transaction ID : 4236281
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="40.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="480.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="80.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 791 OF 2648
<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)
EMILY's List

A. Dr. John K. Inman
Full Name (Last, First, Middle Initial)

Mailing Address 9200 Wadsworth Dr.

City Bethesda	State MD	Zip Code 20817
------------------	-------------	-------------------

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 ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4226726

Amount of Each Receipt this Period

75.00

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

Mailing Address PO Box 2510

City Crested Butte	State CO	Zip Code 81224
-----------------------	-------------	-------------------

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

Name of Employer None	Occupation 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
11	/	26	/	2014

Transaction ID : 4227952

Amount of Each Receipt this Period

50.00

C. Dr. Laura T. Iraci
Full Name (Last, First, Middle Initial)

Mailing Address 161 Ada Ave

City Mountain View	State CA	Zip Code 94043
-----------------------	-------------	-------------------

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

Name of Employer Nasa	Occupation Scientist
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	29	/	2014

Transaction ID : 4242542

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....▶	325.00
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 792 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Amanda Ireland
 Full Name (Last, First, Middle Initial)
 Mailing Address 3211 Velvet Rose St
 City Las Vegas State NV Zip Code 89135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Clark County Courts Occupation Law Clerk
 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 / 25 / 2014
Transaction ID : 4230147
 Amount of Each Receipt this Period
 25.00

B. Amanda Ireland
 Full Name (Last, First, Middle Initial)
 Mailing Address 3211 Velvet Rose St
 City Las Vegas State NV Zip Code 89135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Clark County Courts Occupation Law Clerk
 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
 12 / 26 / 2014
Transaction ID : 4240795
 Amount of Each Receipt this Period
 25.00

C. Ms. Sue A. Ireland
 Full Name (Last, First, Middle Initial)
 Mailing Address 1151 N. Rush St.
 City Gary State IN Zip Code 46403
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236282
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 793 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Eileen Ireland		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228893
Mailing Address 722 5th Street		Amount of Each Receipt this Period 100.00
City Las Vegas	State NM	Zip Code 87701
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 ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Ms. Eileen Ireland		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241717
Mailing Address 722 5th Street		Amount of Each Receipt this Period 100.00
City Las Vegas	State NM	Zip Code 87701
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 ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. Joell Ireland		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228894
Mailing Address 6909 E Greenway Pkway #245		Amount of Each Receipt this Period 35.00
City Scottsdale	State AZ	Zip Code 85254
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Financial Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

SUBTOTAL of Receipts This Page (optional).....▶	235.00
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 794 OF 2648
	<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)
EMILY's List

A. Joell Ireland
Full Name (Last, First, Middle Initial)
Mailing Address 6909 E Greenway Pkway #245

City Scottsdale	State AZ	Zip Code 85254
--------------------	-------------	-------------------

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

Name of Employer Self-Employed	Occupation Financial Advisor
-----------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241316

Amount of Each Receipt this Period
35.00

B. Ms. Carol Irwin
Full Name (Last, First, Middle Initial)
Mailing Address 90 Horn Lane

City Levittown	State NY	Zip Code 11756
-------------------	-------------	-------------------

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 ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4231578

Amount of Each Receipt this Period
15.00

C. Ms. Suzanne Irwin-Wells
Full Name (Last, First, Middle Initial)
Mailing Address 61 Catalpa Ave

City Mill Valley	State CA	Zip Code 94941
---------------------	-------------	-------------------

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

Name of Employer Consultant	Occupation Self
--------------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2014

Transaction ID : 4244747

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 795 OF 2648
	<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)
EMILY's List

A. Flora Lynn Isaacson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1728 Centro West
 City Tiburon State CA Zip Code 94920
 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 **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239921
 Amount of Each Receipt this Period
25.00

B. Kenneth Israel
 Full Name (Last, First, Middle Initial)
 Mailing Address 9259 Fostoria Court
 City San Diego State CA Zip Code 92127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Recruiter
 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
 12 / 28 / 2014
Transaction ID : 4241674
 Amount of Each Receipt this Period
300.00

C. Ms. Nancy M. Iverson
 Full Name (Last, First, Middle Initial)
 Mailing Address 961 Adare Dr.
 City Wheaton State IL Zip Code 60189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 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
 12 / 30 / 2014
Transaction ID : 4242718
 Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... **375.00**
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 796 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Marjorie Ivey		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 27 / 2014 Transaction ID : 4228336
Mailing Address 28 Godwin Lane		Amount of Each Receipt this Period 25.00
City Saint Louis	State MO	Zip Code 63124
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Full Name (Last, First, Middle Initial) B. Marjorie Ivey		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2014 Transaction ID : 4241174
Mailing Address 28 Godwin Lane		Amount of Each Receipt this Period 25.00
City Saint Louis	State MO	Zip Code 63124
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Full Name (Last, First, Middle Initial) C. Mr. David Jablonski		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2014 Transaction ID : 4231063
Mailing Address 5750 S. Kenwood Ave.		Amount of Each Receipt this Period 200.00
City Chicago	State IL	Zip Code 60637
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
University of Chicago	Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 797 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patricia R. Jack
 Full Name (Last, First, Middle Initial)
 Mailing Address 4021 David Lane
 City Alexandria State VA Zip Code 22311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233711
 Amount of Each Receipt this Period
 50.00

B. Dr. Jay Jackman
 Full Name (Last, First, Middle Initial)
 Mailing Address 892 Lathrop Drive
 City Stanford State CA Zip Code 94305
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231823
 Amount of Each Receipt this Period
 50.00

C. Naren L. Jackson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1507 Wilshire Blvd.
 City Arlington State TX Zip Code 76012
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228897
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 798 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margaret Jackson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 762
 City Shelburne State VT Zip Code 05482
 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 ▼ 663.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231064
 Amount of Each Receipt this Period
 113.00

B. Mr. Frederick H. Jackson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Lyman St Apt 118
 City Westborough State MA Zip Code 01581
 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 ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227390
 Amount of Each Receipt this Period
 500.00

c. Mr. Craig M. Jackson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5931 Seacrest View Rd
 City San Diego State CA Zip Code 92121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Consultant, Biochemist (Retired)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239588
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	713.00
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 799 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy Jacobo		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2014 Transaction ID : 4229610
Mailing Address 104 Overlook RD		Amount of Each Receipt this Period 35.00
City Arlington	State MA	Zip Code 02474
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 3090.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Nancy Jacobo		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241473
Mailing Address 104 Overlook RD		Amount of Each Receipt this Period 35.00
City Arlington	State MA	Zip Code 02474
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 3090.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Nancy Jacobo		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4235059
Mailing Address 104 Overlook RD		Amount of Each Receipt this Period 50.00
City Arlington	State MA	Zip Code 02474
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 3090.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 800 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Nancy Jacobo
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 Overlook RD
 City Arlington State MA Zip Code 02474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3090.00

Date of Receipt
 12 / 13 / 2014
Transaction ID : 4236123
 Amount of Each Receipt this Period
 50.00

B. Ms. Nancy Jacobo
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 Overlook RD
 City Arlington State MA Zip Code 02474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3090.00

Date of Receipt
 12 / 13 / 2014
Transaction ID : 4236284
 Amount of Each Receipt this Period
 50.00

C. Ms. Nancy Jacobo
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 Overlook RD
 City Arlington State MA Zip Code 02474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3090.00

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4233405
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 801 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Connie Jacobs		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243284
Mailing Address PO Box 446 49017 Manzanita Road		Amount of Each Receipt this Period 100.00
City Oakhurst	State CA	
Zip Code 93644		Aggregate Year-to-Date ▼ 375.00
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Mrs. Christine Jacobs		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232924
Mailing Address 240 Spruce St.		Amount of Each Receipt this Period 100.00
City Philadelphia	State PA	
Zip Code 19106		Aggregate Year-to-Date ▼ 1200.00
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) ▼

Full Name (Last, First, Middle Initial) C. Dr. Milton S. Jacobs		Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230530
Mailing Address 107 E. Agarita Ave.		Amount of Each Receipt this Period 30.00
City San Antonio	State TX	
Zip Code 78212		Aggregate Year-to-Date ▼ 225.00
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	230.00
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 802 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joan K. Jacobs		Date of Receipt
Mailing Address 2710 Inverness Ct.		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
La Jolla	CA	92037
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4239574
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Dr. Ellen Jacobsen		Date of Receipt
Mailing Address 3604 S. Vine		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Urbana	IL	61802
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4228899
Name of Employer	Occupation	Amount of Each Receipt this Period
Self	Md	<input type="text" value="80.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="960.00"/>	

Full Name (Last, First, Middle Initial) C. Dr. Ellen Jacobsen		Date of Receipt
Mailing Address 3604 S. Vine		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Urbana	IL	61802
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4241368
Name of Employer	Occupation	Amount of Each Receipt this Period
Self	Md	<input type="text" value="80.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="960.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="310.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 803 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Verona C. Jacobson		Date of Receipt
Mailing Address 620 Palo Alto Dr		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Vancouver	WA	98661
FEC ID number of contributing federal political committee.		Transaction ID : 4228370
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1255.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Verona C. Jacobson		Date of Receipt
Mailing Address 620 Palo Alto Dr		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Vancouver	WA	98661
FEC ID number of contributing federal political committee.		Transaction ID : 4240987
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1255.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Sara Jacobson		Date of Receipt
Mailing Address 1003 S 46th St		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Philadelphia	PA	19143
FEC ID number of contributing federal political committee.		Transaction ID : 4231341
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Temple University	Professor	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="235.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 804 OF 2648
	<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	

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)
EMILY's List

A. Ms. Sara Jacobson
Full Name (Last, First, Middle Initial)
Mailing Address 1003 S 46th St
City Philadelphia State PA Zip Code 19143
FEC ID number of contributing federal political committee. **C**
Name of Employer Temple University Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt 12 / 31 / 2014
Transaction ID : 4243521
Amount of Each Receipt this Period 100.00

B. Ms. Gail M. Jacobson
Full Name (Last, First, Middle Initial)
Mailing Address 156 Broad St
City San Luis Obispo State CA Zip Code 93405
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 05 / 2014
Transaction ID : 4232785
Amount of Each Receipt this Period 25.00

C. Ms. Angie Jaffers
Full Name (Last, First, Middle Initial)
Mailing Address 803 Red Bud Trail
City West Lake Hills State TX Zip Code 78746
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 ▼ 295.00

Date of Receipt 12 / 12 / 2014
Transaction ID : 4236015
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
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 805 OF 2648
	<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)
EMILY's List

A. Rebecca H. Jahn
Full Name (Last, First, Middle Initial)
Mailing Address 725 Southbluff Dr
City Westerville State OH Zip Code 43082
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228901
Amount of Each Receipt this Period
50.00

B. Rebecca H. Jahn
Full Name (Last, First, Middle Initial)
Mailing Address 725 Southbluff Dr
City Westerville State OH Zip Code 43082
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4242119
Amount of Each Receipt this Period
50.00

C. Ms. Joan D. James
Full Name (Last, First, Middle Initial)
Mailing Address 319 Woodcock Mtn Road
City Salisbury Mills State NY Zip Code 12577
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 26 / 2014
Transaction ID : 4227955
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 806 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marjorie E. James		Date of Receipt
Mailing Address 14416 Tanglewood Dr.		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Farmers Branch TX 75234		Transaction ID : 4240891
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation None None		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="345.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. David E. James		Date of Receipt
Mailing Address 1724 Yellow Wood Ct		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City State Zip Code Nashville TN 37221		Transaction ID : 4239922
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation None Retired		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="750.00"/>	

Full Name (Last, First, Middle Initial) C. Patricia James		Date of Receipt
Mailing Address 549 Santa Barbara Rd		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Berkeley CA 94707		Transaction ID : 4228902
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Requested Requested		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="290.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="110.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 807 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Patricia James
 Full Name (Last, First, Middle Initial)
 Mailing Address 549 Santa Barbara Rd
 City Berkeley State CA Zip Code 94707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242120
 Amount of Each Receipt this Period
 10.00

B. Ms. Melisa W. Janes
 Full Name (Last, First, Middle Initial)
 Mailing Address 2112 W. Main St.
 City Houston State TX Zip Code 77098
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230535
 Amount of Each Receipt this Period
 30.00

C. Sherri Janes
 Full Name (Last, First, Middle Initial)
 Mailing Address 11953 Burgoyne Road
 City Buchanan State MI Zip Code 49107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Transtech Medical Solutions Occupation Medical Transcriptionist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227956
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 808 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Sherri Janes
 Full Name (Last, First, Middle Initial)
 Mailing Address 11953 Burgoyne Road
 City Buchanan State MI Zip Code 49107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Transtech Medical Solutions Occupation Medical Transcriptionist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 12 / 26 / 2014
Transaction ID : 4240725
 Amount of Each Receipt this Period
 200.00

B. Leslie Janoe
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 196
 City El Granada State CA Zip Code 94018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ja Associates Internaltional, Inc Occupation Ceo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231923
 Amount of Each Receipt this Period
 25.00

c. Ms. Kathryn G. Janson
 Full Name (Last, First, Middle Initial)
 Mailing Address 250 Pantops Mountain Rd., Apt. C12
 City Charlottesville State VA Zip Code 22911
 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 ▼ 350.00

Date of Receipt
 12 / 22 / 2014
Transaction ID : 4239508
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	245.00
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 809 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Christine Jarosz		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236286
Mailing Address 109 Berkeley Rd		Amount of Each Receipt this Period 15.00
City Pittsburgh	State PA	Zip Code 15237
FEC ID number of contributing federal political committee. C	Name of Employer Jaycris Healthcare Resources	
Occupation Business Owner		Aggregate Year-to-Date ▼ 230.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Karen Jarrett		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230139
Mailing Address 214 W 38th St		Amount of Each Receipt this Period 25.00
City Savannah	State GA	Zip Code 31401
FEC ID number of contributing federal political committee. C	Name of Employer Town Of Bluffton	
Occupation Engineer		Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Karen Jarrett		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240783
Mailing Address 214 W 38th St		Amount of Each Receipt this Period 25.00
City Savannah	State GA	Zip Code 31401
FEC ID number of contributing federal political committee. C	Name of Employer Town Of Bluffton	
Occupation Engineer		Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 810 OF 2648
	<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)
EMILY's List

A. Ms. Judy Jashinsky
Full Name (Last, First, Middle Initial)
Mailing Address 225 N Columbus Dr. # 6106

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer Self	Occupation Visual Artist
--------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	17	/	2014

Transaction ID : 4237775

Amount of Each Receipt this Period

390.00

B. Ms. Sheila Jefferson
Full Name (Last, First, Middle Initial)
Mailing Address 1226 Warner Ave., Apt. 102

City Los Angeles	State CA	Zip Code 90024
---------------------	-------------	-------------------

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 ▼ **1850.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230537

Amount of Each Receipt this Period

300.00

C. Gerald Jehle
Full Name (Last, First, Middle Initial)
Mailing Address 4760 Crystal Drive

City Beulah	State MI	Zip Code 49617
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **985.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2014

Transaction ID : 4239258

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 811 OF 2648
	<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)
EMILY's List

A. Ms. Dora Jenkins
Full Name (Last, First, Middle Initial)
Mailing Address 908 Holly Dr.
City Gainesville State GA Zip Code 30501
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 14 / 2014
Transaction ID : 4235454
Amount of Each Receipt this Period
30.00

B. Mr. Norman W. Jenks
Full Name (Last, First, Middle Initial)
Mailing Address 2220 132nd Ave SE Apt A202
City Bellevue State WA Zip Code 98005
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
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
12 / 03 / 2014
Transaction ID : 4232157
Amount of Each Receipt this Period
25.00

C. Ms. Gerry M. Jennings
Full Name (Last, First, Middle Initial)
Mailing Address 317 Fox Drive
City Great Falls State MT Zip Code 59404
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 24 / 2014
Transaction ID : 4240265
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
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 812 OF 2648
	<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)
EMILY's List

A. Ms. Martha Jennings
Full Name (Last, First, Middle Initial)
Mailing Address 5318 S. Woodlawn Ave., # 1

City Chicago	State IL	Zip Code 60615
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230539

Amount of Each Receipt this Period
113.00

B. Ms. Marilyn Jensen
Full Name (Last, First, Middle Initial)
Mailing Address 21436 Via Straits Lane

City Huntington. Beach	State CA	Zip Code 92646
---------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
632.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228905

Amount of Each Receipt this Period
25.00

C. Ms. Marilyn Jensen
Full Name (Last, First, Middle Initial)
Mailing Address 21436 Via Straits Lane

City Huntington. Beach	State CA	Zip Code 92646
---------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
632.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241477

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	163.00
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 813 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marilyn Jensen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234476
Mailing Address 21436 Via Straits Lane		Amount of Each Receipt this Period 95.00
City Huntington Beach	State CA	Zip Code 92646
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 632.50
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 632.50	

Full Name (Last, First, Middle Initial) B. Ms. Mary Jensen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238640
Mailing Address 2101 Dover Court		Amount of Each Receipt this Period 30.00
City Walnut Creek	State CA	Zip Code 94598
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
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 ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Kay Jensen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228906
Mailing Address 6167 Dell Drive #2		Amount of Each Receipt this Period 15.00
City Madison	State WI	Zip Code 53718
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 203.00
Name of Employer Self	Occupation Accountant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.00	

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 814 OF 2648
	<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)
EMILY's List

A. Kay Jenson
Full Name (Last, First, Middle Initial)
Mailing Address 6167 Dell Drive #2
City Madison State WI Zip Code 53718
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Accountant
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **203.00**

Date of Receipt **12 / 28 / 2014**
Transaction ID : 4242121
Amount of Each Receipt this Period **15.00**

B. Ms. Joyce E. Jentoft
Full Name (Last, First, Middle Initial)
Mailing Address 12764 Girdled Rd.
City Painesville State OH Zip Code 44077
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 **350.00**

Date of Receipt **12 / 02 / 2014**
Transaction ID : 4231067
Amount of Each Receipt this Period **150.00**

C. Margaret Jespersen
Full Name (Last, First, Middle Initial)
Mailing Address 29663 Juniper Road
City West Union State IA Zip Code 52175
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 11 / 2014**
Transaction ID : 4234697
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **265.00**
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 815 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol B. Jessup		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233692
Mailing Address 1919 Chestnut Street #1307		Amount of Each Receipt this Period 25.00
City Philadelphia	State PA	Zip Code 19103
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 ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Ms. Joan C. Jewett		Date of Receipt 12 / 13 / 2014 Transaction ID : 4236287
Mailing Address 110 Gardner Drive, Apt. 215		Amount of Each Receipt this Period 63.00
City Hilton Head	State SC	Zip Code 29926
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 ▼ 1256.00	

Full Name (Last, First, Middle Initial) C. Jennifer Jewett		Date of Receipt 12 / 10 / 2014 Transaction ID : 4234502
Mailing Address 805 Crescent Dr.		Amount of Each Receipt this Period 15.00
City Lancaster	State SC	Zip Code 29720
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 ▼ 215.00	

SUBTOTAL of Receipts This Page (optional).....▶	103.00
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 816 OF 2648
	<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)
EMILY's List

A. Ms. Mary Ann Joca
Full Name (Last, First, Middle Initial)
Mailing Address 915 Los Arboles Ave., N.W.
City Albuquerque State NM Zip Code 87107
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 ▼
440.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4239927
Amount of Each Receipt this Period
30.00

B. Mr. Paul Johanson
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 112
City Oxford State IA Zip Code 52322
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
REQUESTED REQUESTED
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
12 / 06 / 2014
Transaction ID : 4234003
Amount of Each Receipt this Period
25.00

C. Mr. Michael Johas Teener
Full Name (Last, First, Middle Initial)
Mailing Address 23 Acacia Way
City Santa Cruz State CA Zip Code 95062
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Broadcom Engineer
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
12 / 12 / 2014
Transaction ID : 4236016
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 817 OF 2648
	<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)
EMILY's List

A. Ms. Sharon D. Johe
Full Name (Last, First, Middle Initial)
Mailing Address 278 Riverwood Drive

City Lewisville	State NC	Zip Code 27023
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
920.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2014

Transaction ID : 4233656

Amount of Each Receipt this Period

30.00

B. Ms. Sharon D. Johe
Full Name (Last, First, Middle Initial)
Mailing Address 278 Riverwood Drive

City Lewisville	State NC	Zip Code 27023
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
920.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2014

Transaction ID : 4237746

Amount of Each Receipt this Period

30.00

C. Ms. Lucy Johns
Full Name (Last, First, Middle Initial)
Mailing Address 561 Greenwich St

City San Francisco	State CA	Zip Code 94133
-----------------------	-------------	-------------------

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

Name of Employer Self	Occupation Owner
--------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2014

Transaction ID : 4232295

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1060.00
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 818 OF 2648
	(check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Cindy Johns
Full Name (Last, First, Middle Initial)

Mailing Address 9477 Cedarhurst Ln., Unit A

City Highlands Ranch	State CO	Zip Code 80129
-------------------------	-------------	-------------------

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

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

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
11	/	26	/	2014

Transaction ID : 4227678

Amount of Each Receipt this Period

100.00

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

Mailing Address 2211 Ala Wai Blvd Apt 3114

City Honolulu	State HI	Zip Code 96815
------------------	-------------	-------------------

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

Name of Employer Bisk Education	Occupation Professor
------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4231718

Amount of Each Receipt this Period

50.00

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

Mailing Address 437 New York Ave NW #406

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

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

Name of Employer Center For America Progress	Occupation Executive Director, Generation Progres
---	--

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
11	/	30	/	2014

Transaction ID : 4229619

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 819 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Anne Johnson

Mailing Address 437 New York Ave NW
#406

City Washington State DC Zip Code 20001

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

Name of Employer Center For America Progress Occupation Executive Director, Generation Progres

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
 12 / 28 / 2014
Transaction ID : 4241314

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. Ms. Pamela L. Johnson

Mailing Address 8301 Woodborough Way

City Fair Oaks State CA Zip Code 95628

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

Name of Employer Dignity Health Occupation Chaplain

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239318

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Ms. A Murray Murray Johnson

Mailing Address 54 Roosevelt Drive

City Poughquag State NY Zip Code 12570

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

Name of Employer lbm Occupation Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239929

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

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 820 OF 2648
	<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)
EMILY's List

A. Kristi Johnson
Full Name (Last, First, Middle Initial)

Mailing Address 1317 Ptarmigan Dr. #6

City Walnut Creek State CA Zip Code 94595

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 11 / 28 / 2014
Transaction ID : 4228909

Amount of Each Receipt this Period
 15.00

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

Mailing Address 1317 Ptarmigan Dr. #6

City Walnut Creek State CA Zip Code 94595

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 12 / 28 / 2014
Transaction ID : 4241478

Amount of Each Receipt this Period
 15.00

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

Mailing Address 2601 Central St Unit 201

City Evanston State IL Zip Code 60201

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 12 / 20 / 2014
Transaction ID : 4239238

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00

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 821 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Shirley M. Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1401 Fountaingrove Pkwy
 City Santa Rosa State CA Zip Code 95403
 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 ▼
 235.00

Date of Receipt
 12 / 22 / 2014
Transaction ID : 4238339
 Amount of Each Receipt this Period
 50.00

B. Ms. Marcia Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 160 Grandview Rd.
 City Boyertown State PA Zip Code 19512
 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 ▼
 265.00

Date of Receipt
 12 / 10 / 2014
Transaction ID : 4234546
 Amount of Each Receipt this Period
 15.00

C. Ms. Marcia Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 160 Grandview Rd.
 City Boyertown State PA Zip Code 19512
 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 ▼
 265.00

Date of Receipt
 12 / 18 / 2014
Transaction ID : 4238150
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 822 OF 2648
	<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)
EMILY's List

A. Ms. Betty B. Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 1155 Vuelta del Yaba
City Green Valley State AZ Zip Code 85622
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 485.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4239067
Amount of Each Receipt this Period
100.00

B. Ms. Carolyn Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 34 Lullwater Estate Road NE
City Atlanta State GA Zip Code 30307
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 725.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231503
Amount of Each Receipt this Period
100.00

C. Dr. Daniel F Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 3652 Tamarack
City Eau Claire State WI Zip Code 54701
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 950.00

Date of Receipt
11 / 25 / 2014
Transaction ID : 4230173
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 823 OF 2648
	<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)
EMILY's List

A. Dr. Daniel F Johnson
Full Name (Last, First, Middle Initial)

Mailing Address 3652 Tamarack

City Eau Claire State WI Zip Code 54701

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014

Transaction ID : 4240838

Amount of Each Receipt this Period
 50.00

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

Mailing Address PO Box 993

City Cimarron State KS Zip Code 67835

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 ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4230053

Amount of Each Receipt this Period
 15.00

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

Mailing Address PO Box 993

City Cimarron State KS Zip Code 67835

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 ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014

Transaction ID : 4240662

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00

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 824 OF 2648
	<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)
EMILY's List

A. Ms. Karen M. Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 910 Moonglo Rd Spc 29

City Buhl	State ID	Zip Code 83316
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 ▼ 275.00	

Date of Receipt
M M / D D / Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228913

Amount of Each Receipt this Period
25.00

B. Mr. Robert Carl Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 1724 Marys Lake Rd.

City Estes Park	State CO	Zip Code 80517
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 ▼ 275.00	

Date of Receipt
M M / D D / Y Y Y Y
12 / 21 / 2014
Transaction ID : 4239367

Amount of Each Receipt this Period
50.00

C. Ms. Linda Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 16563 Canyon Cross

City San Antonio	State TX	Zip Code 78232
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 ▼ 288.00	

Date of Receipt
M M / D D / Y Y Y Y
12 / 01 / 2014
Transaction ID : 4230546

Amount of Each Receipt this Period
57.00

SUBTOTAL of Receipts This Page (optional).....▶	132.00
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 825 OF 2648
	<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)
EMILY's List

A. Melinda Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 1844 Sunset Dr.
City Ventura State CA Zip Code 93001
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Arbitrator/Mediator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 405.00

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234201
Amount of Each Receipt this Period 25.00

B. Melinda Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 1844 Sunset Dr.
City Ventura State CA Zip Code 93001
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Arbitrator/Mediator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 405.00

Date of Receipt
12 / 16 / 2014
Transaction ID : 4237140
Amount of Each Receipt this Period 35.00

C. Ms. Nancy Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 16244 Jatos Cir
City Lakeville State MN Zip Code 55044
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230544
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 260.00
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 826 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. David E. Johnson		Date of Receipt 12 / 19 / 2014 Transaction ID : 4238643
Mailing Address 18599 Burkland Rd.		Amount of Each Receipt this Period 50.00
City Mount Vernon	State WA	Zip Code 98274
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Skagit Valley Tulip Festival	Occupation Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

Full Name (Last, First, Middle Initial) B. Wayne Johnson		Date of Receipt 12 / 17 / 2014 Transaction ID : 4237989
Mailing Address 1023 Emileigh Drive		Amount of Each Receipt this Period 50.00
City Summit	State MS	Zip Code 39666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Smrmc	Occupation Crna	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) C. Wayne Johnson		Date of Receipt 12 / 01 / 2014 Transaction ID : 4231068
Mailing Address 1023 Emileigh Drive		Amount of Each Receipt this Period 100.00
City Summit	State MS	Zip Code 39666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Smrmc	Occupation Crna	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 827 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Nancy Johnston
 Full Name (Last, First, Middle Initial)
 Mailing Address 20500 Oak Highland Ave
 City Tehachapi State CA Zip Code 93561
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230547
 Amount of Each Receipt this Period
 100.00

B. Thomas Johnston
 Full Name (Last, First, Middle Initial)
 Mailing Address 4690 Pioneer Rd
 City Medford State OR Zip Code 97501
 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 ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230145
 Amount of Each Receipt this Period
 25.00

C. Thomas Johnston
 Full Name (Last, First, Middle Initial)
 Mailing Address 4690 Pioneer Rd
 City Medford State OR Zip Code 97501
 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 ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240792
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 828 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maureen Johnston		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236288
Mailing Address 116 Calle El Padre		Amount of Each Receipt this Period 300.00
City Los Gatos	State CA	Zip Code 95032
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Self	Occupation Psychotherapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Julie Ballard Johnstone		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4231072
Mailing Address 2809 Boston St., Apt. 411		Amount of Each Receipt this Period 100.00
City Baltimore	State MD	Zip Code 21224
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 ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Ms. Suzanne Joiner		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234393
Mailing Address 7290 Greenfarms Dr.		Amount of Each Receipt this Period 250.00
City Cincinnati	State OH	Zip Code 45224
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 829 OF 2648
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Anne Jolly
Full Name (Last, First, Middle Initial)

Mailing Address 419 Chimney Rock Road

City Earlysville State VA Zip Code 22936

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

Name of Employer Occupation
Wvpt Development Professional

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 4228916

Amount of Each Receipt this Period
20.00

B. Ms. Anne Jolly
Full Name (Last, First, Middle Initial)

Mailing Address 419 Chimney Rock Road

City Earlysville State VA Zip Code 22936

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

Name of Employer Occupation
Wvpt Development Professional

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014

Transaction ID : 4242125

Amount of Each Receipt this Period
20.00

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

Mailing Address 1354 Court St.

City Alameda State CA Zip Code 94501

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

Name of Employer Occupation
Cavium Software Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
259.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2014

Transaction ID : 4229565

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00

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 830 OF 2648
	<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)
EMILY's List

A. Joel Jones
Full Name (Last, First, Middle Initial)

Mailing Address 1354 Court St.

City Alameda State CA Zip Code 94501

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

Name of Employer Cavium Occupation Software Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **259.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4241799

Amount of Each Receipt this Period
 10.00

B. Ms. Nancy H. Jones
Full Name (Last, First, Middle Initial)

Mailing Address 2813 Meadow Wood Dr. W.

City Chesapeake State VA Zip Code 23321

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014

Transaction ID : 4236289

Amount of Each Receipt this Period
 10.00

C. Nancy F. Jones
Full Name (Last, First, Middle Initial)

Mailing Address 2714 N Orchard Ave

City Tucson State AZ Zip Code 85712

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4241482

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **40.00**

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 831 OF 2648
	(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)
EMILY's List

A. Nancy F. Jones
Full Name (Last, First, Middle Initial)
Mailing Address 2714 N Orchard Ave
City Tucson State AZ Zip Code 85712
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
11 / 30 / 2014
Transaction ID : 4229597
Amount of Each Receipt this Period 25.00

B. Nancy F. Jones
Full Name (Last, First, Middle Initial)
Mailing Address 2714 N Orchard Ave
City Tucson State AZ Zip Code 85712
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4241481
Amount of Each Receipt this Period 25.00

C. Larry Jones
Full Name (Last, First, Middle Initial)
Mailing Address 2840 West Bay Drive
City Belleair Bluffs State FL Zip Code 33770
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 18 / 2014
Transaction ID : 4238088
Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 832 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Karen A. Jones		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2014 Transaction ID : 4235788
Mailing Address 359 Summit Point Court		Amount of Each Receipt this Period 20.00
City Hastings	State MN	Zip Code 55033
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 245.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Joan K. Jones		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237701
Mailing Address 1035 May Court		Amount of Each Receipt this Period 15.00
City Santa Barbara	State CA	Zip Code 93111
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 280.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Beverly R. Jones		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238647
Mailing Address 600 S. Dixie Hwy Apt223		Amount of Each Receipt this Period 50.00
City West Palm Beach	State FL	Zip Code 33401
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 600.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 833 OF 2648
	<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)
EMILY's List

A. Ms. Ann R. Jones
Full Name (Last, First, Middle Initial)
Mailing Address 2407 Pine St
City Philadelphia State PA Zip Code 19103
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 12 / 15 / 2014
Transaction ID : 4236819
Amount of Each Receipt this Period 100.00

B. Ms. Mary Jones
Full Name (Last, First, Middle Initial)
Mailing Address S11W30407 Summit Ave.
City Waukesha State WI Zip Code 53188
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 12 / 01 / 2014
Transaction ID : 4230548
Amount of Each Receipt this Period 35.00

C. Nancy Jones
Full Name (Last, First, Middle Initial)
Mailing Address 6220 Cheyenne Pass
City Bulverde State TX Zip Code 78163
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 ▼ 325.00

Date of Receipt 11 / 27 / 2014
Transaction ID : 4228359
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
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 834 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Nancy Jones

Mailing Address 6220 Cheyenne Pass

City State Zip Code
Bulverde TX 78163

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241191

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Ms. Judith K. Jones , MD

Mailing Address 14017 Marblestone Dr

City State Zip Code
Clifton VA 20124

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

Name of Employer Occupation
The Degge Group, Ltd Business Owner

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
 12 / 31 / 2014
Transaction ID : 4243165

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Ms. Linda C. Joplin

Mailing Address 13312 Edinburgh Dr

City State Zip Code
Westminster CA 92683

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 ▼
365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4244806

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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 835 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda C. Joplin		Date of Receipt 12 / 22 / 2014 Transaction ID : 4239399
Mailing Address 13312 Edinburgh Dr		Amount of Each Receipt this Period 25.00
City Westminster	State CA	Zip Code 92683
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

Full Name (Last, First, Middle Initial) B. Ms. Ruth Jordan		Date of Receipt 12 / 30 / 2014 Transaction ID : 4242981
Mailing Address 8637 e via escuela		Amount of Each Receipt this Period 35.00
City scottsdale	State AZ	Zip Code 85258
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	

Full Name (Last, First, Middle Initial) C. Betty Jordan		Date of Receipt 11 / 28 / 2014 Transaction ID : 4228919
Mailing Address 1065 E 223 Street		Amount of Each Receipt this Period 10.00
City Bronx	State NY	Zip Code 10466
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 ▼ 290.00	

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 836 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Betty Jordan		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2014 Transaction ID : 4231658
Mailing Address 1065 E 223 Street		Amount of Each Receipt this Period 15.00
City Bronx	State NY	Zip Code 10466
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 ▼ 290.00	

Full Name (Last, First, Middle Initial) B. Diane Jordan		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228918
Mailing Address 1649 Miracosta St		Amount of Each Receipt this Period 25.00
City San Pedro	State CA	Zip Code 90732
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 ▼ 275.00	

Full Name (Last, First, Middle Initial) C. Diane Jordan		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241302
Mailing Address 1649 Miracosta St		Amount of Each Receipt this Period 25.00
City San Pedro	State CA	Zip Code 90732
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 ▼ 275.00	

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 837 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Marcia Jordan
 Full Name (Last, First, Middle Initial)
 Mailing Address 6807 30th Avenue NE
 City Seattle State WA Zip Code 98115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Family Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 240.00

Date of Receipt
 12 / 01 / 2014
Transaction ID : 4230549
 Amount of Each Receipt this Period
 120.00

B. Mr. Dwayne Jose
 Full Name (Last, First, Middle Initial)
 Mailing Address 4906 Westbriar Dr
 City Fort Worth State TX Zip Code 76109
 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 300.00

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231074
 Amount of Each Receipt this Period
 100.00

C. Daniel Joseph
 Full Name (Last, First, Middle Initial)
 Mailing Address 675 Belvedere Drive
 City Benicia State CA Zip Code 94510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Alamo Ace Hardware Occupation Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 300.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231726
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....	245.00
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 838 OF 2648
	<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)
EMILY's List

A. Mr. David Joslyn
Full Name (Last, First, Middle Initial)

Mailing Address 3140 Sumac Ridge Road

City Malibu	State CA	Zip Code 90265
----------------	-------------	-------------------

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

Name of Employer McCullough Campbell And Lane Llp	Occupation Lawyer
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **370.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	05	/	2014

Transaction ID : 4232770

Amount of Each Receipt this Period

30.00

B. Ms. Luana Josvold
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 100

City Mattapoisett	State MA	Zip Code 02739
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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 ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	22	/	2014

Transaction ID : 4238256

Amount of Each Receipt this Period

75.00

C. Mr. Jeremy G. Judge
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 145

City Roxbury	State CT	Zip Code 06783
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	17	/	2014

Transaction ID : 4237444

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....▶	305.00
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 839 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

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

Mailing Address 1620 south bend Avenue

City State Zip Code
South bend IN 46617

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

Name of Employer Occupation
Sweeney Julian Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
M M / D D / Y Y Y Y
12 / 23 / 2014

Transaction ID : 4239932

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Wanda L. Justesen , Esq.

Mailing Address 219 Woodland Avenue

City State Zip Code
Bloomfield CT 06002

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

Name of Employer Occupation
None Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
M M / D D / Y Y Y Y
11 / 27 / 2014

Transaction ID : 4228389

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Wanda L. Justesen , Esq.

Mailing Address 219 Woodland Avenue

City State Zip Code
Bloomfield CT 06002

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

Name of Employer Occupation
None Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
M M / D D / Y Y Y Y
12 / 27 / 2014

Transaction ID : 4241058

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **225.00**

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 840 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Faith L. Justice		Date of Receipt
Mailing Address 180 Stratford Rd		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Brooklyn	NY	11218
FEC ID number of contributing federal political committee.		Transaction ID : 4228368
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Raggedy Moon Books	Publisher/Writer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="325.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Faith L. Justice		Date of Receipt
Mailing Address 180 Stratford Rd		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Brooklyn	NY	11218
FEC ID number of contributing federal political committee.		Transaction ID : 4241033
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Raggedy Moon Books	Publisher/Writer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="325.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michel E. Kabay		Date of Receipt
Mailing Address 255 Flood Rd		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Barre	VT	05641
FEC ID number of contributing federal political committee.		Transaction ID : 4237067
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
Norwich University	Professor	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 841 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Alice M. Kachman , M.D.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239933
Mailing Address 18236 Stamford St		Amount of Each Receipt this Period 40.00
City Livonia	State MI	Zip Code 48152
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 325.00
Name of Employer Requested	Occupation Physician,Internal Medicine	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Ruth H. Kaczmarek		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238652
Mailing Address 95 Stone Ln		Amount of Each Receipt this Period 10.00
City Springville	State TN	Zip Code 38256
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 705.00
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 ▼ 705.00	

Full Name (Last, First, Middle Initial) C. Ruth H. Kaczmarek		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2014 Transaction ID : 4239464
Mailing Address 95 Stone Ln		Amount of Each Receipt this Period 10.00
City Springville	State TN	Zip Code 38256
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 705.00
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 ▼ 705.00	

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 842 OF 2648
	<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)
EMILY's List

A. Ruth H. Kaczmarek
Full Name (Last, First, Middle Initial)

Mailing Address 95 Stone Ln

City Springville State TN Zip Code 38256

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 ▼ **705.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2014

Transaction ID : 4242908

Amount of Each Receipt this Period
10.00

B. Ms. Sharon Kaczmarowski
Full Name (Last, First, Middle Initial)

Mailing Address 16677 Panther Paw Ct

City Fort Myers State FL Zip Code 33908

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 ▼ **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014

Transaction ID : 4227645

Amount of Each Receipt this Period
1000.00

C. Ms. Martha H. Kaemmer
Full Name (Last, First, Middle Initial)

Mailing Address 4 Crocus HI.

City Saint Paul State MN Zip Code 55102

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2014

Transaction ID : 4233276

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	1510.00
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 843 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Dean Kahl		Date of Receipt
Mailing Address 2 Fox Lair Court		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Asheville	NC	28805
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4230224
Name of Employer	Occupation	Amount of Each Receipt this Period
warren wilson college	CHEMISTRY TEACHER	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="275.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. Ronald S. Kahn		Date of Receipt
Mailing Address 31 Pierce RD		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Lafayette	NJ	07848
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4235783
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="450.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Helen Kahn		Date of Receipt
Mailing Address 1766 Sand Hill Road Apt 409		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Palo Alto	CA	94304
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4243342
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1275.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 844 OF 2648
	<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)
EMILY's List

A. Ms. Helen Kahn
Full Name (Last, First, Middle Initial)
Mailing Address 1766 Sand Hill Road Apt 409

City Palo Alto	State CA	Zip Code 94304
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : 4243343

Amount of Each Receipt this Period
1000.00

B. Ms. Donna S. Kahn
Full Name (Last, First, Middle Initial)
Mailing Address 726 Wolf Hill Road,

City Hillsdale	State NY	Zip Code 12529
-------------------	-------------	-------------------

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 ▼
1875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2014

Transaction ID : 4233992

Amount of Each Receipt this Period
75.00

C. Ms. Donna S. Kahn
Full Name (Last, First, Middle Initial)
Mailing Address 726 Wolf Hill Road,

City Hillsdale	State NY	Zip Code 12529
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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 ▼
1875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : 4243308

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	1175.00
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 845 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Heather Kahn		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237868
Mailing Address 1970 Southgate Way		Amount of Each Receipt this Period 250.00
City Grants Pass	State OR	
Zip Code 07527		Aggregate Year-to-Date ▼ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Md	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Ms. Phyllis Kahn		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2014 Transaction ID : 4242771
Mailing Address 115 Island Ave. W		Amount of Each Receipt this Period 100.00
City Minneapolis	State MN	
Zip Code 55401		Aggregate Year-to-Date ▼ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer State Of Mn	Occupation Legislator	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Ms. Lorraine A. Kaimal		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4231868
Mailing Address 13 John St.		Amount of Each Receipt this Period 25.00
City Hamilton	State NY	
Zip Code 13346		Aggregate Year-to-Date ▼ 325.00
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) ▼

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 846 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Bernhard Kaltenboeck		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238654
Mailing Address 1205 Sunnyslope Court		Amount of Each Receipt this Period 25.00
City Auburn	State AL	Zip Code 36832
FEC ID number of contributing federal political committee. C		
Name of Employer Auburn University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Dr. Barbara Kamholz , M.D.		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241662
Mailing Address 105 Loring Ave		Amount of Each Receipt this Period 500.00
City Mill Valley	State CA	Zip Code 94941
FEC ID number of contributing federal political committee. C		
Name of Employer Va	Occupation Psychiatrist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Dr. Aviva Kamin		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233704
Mailing Address 14216 N. Biltmore Drive		Amount of Each Receipt this Period 25.00
City Oro Valley	State AZ	Zip Code 85755
FEC ID number of contributing federal political committee. C		
Name of Employer State Of California	Occupation Athletic Commissioner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 847 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Eileen S. Kane		Date of Receipt 11 / 28 / 2014 Transaction ID : 4228926
Mailing Address 0841 SW Gaines Street Unit 1200		Amount of Each Receipt this Period 10.00
City Portland	State OR	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 230.16
Name of Employer None	Occupation Artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Eileen S. Kane		Date of Receipt 12 / 28 / 2014 Transaction ID : 4242127
Mailing Address 0841 SW Gaines Street Unit 1200		Amount of Each Receipt this Period 10.00
City Portland	State OR	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 230.16
Name of Employer None	Occupation Artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Eileen S. Kane		Date of Receipt 12 / 23 / 2014 Transaction ID : 4239935
Mailing Address 0841 SW Gaines Street Unit 1200		Amount of Each Receipt this Period 15.00
City Portland	State OR	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 230.16
Name of Employer None	Occupation Artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	35.00
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 848 OF 2648
	<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)
EMILY's List

A. Dr. Eileen S. Kane
Full Name (Last, First, Middle Initial)

Mailing Address 0841 SW Gaines Street
Unit 1200

City Portland State OR Zip Code 97239

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

Name of Employer None Occupation Artist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.16

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240872

Amount of Each Receipt this Period
15.00

B. Ms. Pamela Kangas
Full Name (Last, First, Middle Initial)

Mailing Address 3655 Oakwood

City Ann Arbor State MI Zip Code 48104

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

Name of Employer U Of Mich Health System Occupation Rn

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
11 / 29 / 2014
Transaction ID : 4230214

Amount of Each Receipt this Period
50.00

C. Ms. Pamela Kangas
Full Name (Last, First, Middle Initial)

Mailing Address 3655 Oakwood

City Ann Arbor State MI Zip Code 48104

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

Name of Employer U Of Mich Health System Occupation Rn

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
12 / 29 / 2014
Transaction ID : 4244929

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00

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 849 OF 2648
	<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)
EMILY's List

A. Ms. Marcia J. Kanner
Full Name (Last, First, Middle Initial)
Mailing Address 6915 Barquera Street
City Coral Gables State FL Zip Code 33146
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 **215.00**

Date of Receipt **12 / 09 / 2014**
Transaction ID : 4233750
Amount of Each Receipt this Period **100.00**

B. Ms. Jaclyn Kanner
Full Name (Last, First, Middle Initial)
Mailing Address 2203 Ridgemont Dr.
City Los Angeles State CA Zip Code 90046
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Writer/Businesswoman
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1641.40**

Date of Receipt **12 / 19 / 2014**
Transaction ID : 4243713
Amount of Each Receipt this Period **1541.40**

C. Mr. Eugene Kapaloski
Full Name (Last, First, Middle Initial)
Mailing Address 8882 Collingwood Dr.
City Los Angeles State CA Zip Code 90069
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 **2550.00**

Date of Receipt **11 / 25 / 2014**
Transaction ID : 4227389
Amount of Each Receipt this Period **1200.00**

SUBTOTAL of Receipts This Page (optional)..... **2841.40**
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 850 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Tasso Kaper		Date of Receipt MM / DD / YYYY 12 / 05 / 2014 Transaction ID : 4232382
Mailing Address 3 Running Ridge Rd.		Amount of Each Receipt this Period 375.00
City Manchester	State MA	Zip Code 01944
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

Full Name (Last, First, Middle Initial) B. Naomi Kaplan		Date of Receipt MM / DD / YYYY 11 / 28 / 2014 Transaction ID : 4228927
Mailing Address 725 S. Decatur Street		Amount of Each Receipt this Period 25.00
City Denver	State CO	Zip Code 80219
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Jcmh	Occupation Therapist, Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Naomi Kaplan		Date of Receipt MM / DD / YYYY 12 / 28 / 2014 Transaction ID : 4242128
Mailing Address 725 S. Decatur Street		Amount of Each Receipt this Period 25.00
City Denver	State CO	Zip Code 80219
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Jcmh	Occupation Therapist, Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	425.00
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 851 OF 2648
	<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)
EMILY's List

A. Ms. Sharron W. Kaplan
 Full Name (Last, First, Middle Initial)
 Mailing Address 528 West 111 St
 Apt 24
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 12 / 01 / 2014
Transaction ID : 4230263
 Amount of Each Receipt this Period
 25.00

B. Mrs. Arlene Kaplan
 Full Name (Last, First, Middle Initial)
 Mailing Address 9764 Northern Dancer Dr
 City Las Vegas State NV Zip Code 89117
 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 ▼ 1555.00

Date of Receipt
 12 / 30 / 2014
Transaction ID : 4243061
 Amount of Each Receipt this Period
 50.00

C. Mrs. Arlene Kaplan
 Full Name (Last, First, Middle Initial)
 Mailing Address 9764 Northern Dancer Dr
 City Las Vegas State NV Zip Code 89117
 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 ▼ 1555.00

Date of Receipt
 12 / 30 / 2014
Transaction ID : 4243062
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 852 OF 2648
	<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	

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)
EMILY's List

A. Ms. Shara Kaplin
Full Name (Last, First, Middle Initial)
Mailing Address 1050 Leyden St
City Denver State CO Zip Code 80220
FEC ID number of contributing federal political committee. **C**
Name of Employer Chicago Foundation for Women Occupation Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 08 / 2014
Transaction ID : 4233309
Amount of Each Receipt this Period 250.00

B. Ms. June Kapp
Full Name (Last, First, Middle Initial)
Mailing Address 19 Haytown Rd
City Lebanon State NJ Zip Code 08833
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4234728
Amount of Each Receipt this Period 100.00

C. Ronald Kappel
Full Name (Last, First, Middle Initial)
Mailing Address 200 Annex Rd
City Biloxi State MS Zip Code 39531
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 ▼ 220.00

Date of Receipt 11 / 28 / 2014
Transaction ID : 4228928
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00
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 853 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ronald Kappel

Mailing Address 200 Annex Rd

City State Zip Code
Biloxi MS 39531

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

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241723

Amount of Each Receipt this Period
20.00

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

Mailing Address 1171 E Knight Ln

City State Zip Code
Tempe AZ 85284

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

Name of Employer Occupation
Requested Requested

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 / 26 / 2014
Transaction ID : 4227968

Amount of Each Receipt this Period
25.00

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

Mailing Address 1171 E Knight Ln

City State Zip Code
Tempe AZ 85284

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

Name of Employer Occupation
Requested Requested

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
12 / 26 / 2014
Transaction ID : 4240738

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 854 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Trudy Kareus
 Full Name (Last, First, Middle Initial)
 Mailing Address 2130 Tamarack
 City Boulder State CO Zip Code 80304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Usda Occupation Agency Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232919
 Amount of Each Receipt this Period
 25.00

B. Trudy Kareus
 Full Name (Last, First, Middle Initial)
 Mailing Address 2130 Tamarack
 City Boulder State CO Zip Code 80304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Usda Occupation Agency Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228382
 Amount of Each Receipt this Period
 50.00

C. Ms. Carol Karlmann
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 956
 City North Truro State MA Zip Code 02652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237089
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 855 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Sandi A Karnowski		Date of Receipt
Mailing Address 4532 Douglas Dr N		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Minneapolis	MN	55422
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4232072
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="226.00"/>	

Full Name (Last, First, Middle Initial) B. Mrs. Sandi A Karnowski		Date of Receipt
Mailing Address 4532 Douglas Dr N		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Minneapolis	MN	55422
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4227969
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="226.00"/>	

Full Name (Last, First, Middle Initial) C. Mrs. Sandi A Karnowski		Date of Receipt
Mailing Address 4532 Douglas Dr N		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
Minneapolis	MN	55422
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4235550
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="226.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="40.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 856 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Sandi A Karnowski		Date of Receipt
Mailing Address 4532 Douglas Dr N		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Minneapolis	MN	55422
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="226.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>

Full Name (Last, First, Middle Initial) B. Mrs. Sandi A Karnowski		Date of Receipt
Mailing Address 4532 Douglas Dr N		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Minneapolis	MN	55422
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="226.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Carol D. Karp		Date of Receipt
Mailing Address 2120 Geri Ln.		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hillsborough	CA	94010
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Cygnus Therapeutics	Regulatory Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="125.00"/>

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="165.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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 857 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Julie Kascal		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2014 Transaction ID : 4239180
Mailing Address 1405 Browning Road		Amount of Each Receipt this Period 30.00
City Pittsburgh	State PA	Zip Code 15206
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer Self	Occupation Organziational Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Ms. Barbara Kashian-Snow		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228929
Mailing Address 8502 Old Sauk Rd Apt.#206		Amount of Each Receipt this Period 5.00
City Middleton	State WI	Zip Code 53562
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 376.00
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 ▼ 376.00	

Full Name (Last, First, Middle Initial) C. Ms. Barbara Kashian-Snow		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241724
Mailing Address 8502 Old Sauk Rd Apt.#206		Amount of Each Receipt this Period 5.00
City Middleton	State WI	Zip Code 53562
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 376.00
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 ▼ 376.00	

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 858 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Barbara Kashian-Snow
 Full Name (Last, First, Middle Initial)
 Mailing Address 8502 Old Sauk Rd Apt.#206
 City Middleton State WI Zip Code 53562
 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 ▼ 376.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239088
 Amount of Each Receipt this Period
 10.00

B. Ms. Barbara Kashian-Snow
 Full Name (Last, First, Middle Initial)
 Mailing Address 8502 Old Sauk Rd Apt.#206
 City Middleton State WI Zip Code 53562
 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 ▼ 376.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238656
 Amount of Each Receipt this Period
 15.00

C. Ms. Ann Kaslow
 Full Name (Last, First, Middle Initial)
 Mailing Address 1025 E 16TH Street
 City Brooklyn State NY Zip Code 11230
 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 ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234431
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 859 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ann S. Kasper		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238657
Mailing Address 466 W. Campus View Drive		Amount of Each Receipt this Period 305.00
City Riverside	State CA	Zip Code 92507
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 ▼ 488.00	

Full Name (Last, First, Middle Initial) B. Neal Kass		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 30 / 2014 Transaction ID : 4242948
Mailing Address 9 Damonmill Square, Ste. 4a-1		Amount of Each Receipt this Period 250.00
City Concord	State MA	Zip Code 01742
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Child Psychiatrist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. Ms. Diana L. Kasson		Date of Receipt M M M / D D D / Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228930
Mailing Address 4060 Simms St		Amount of Each Receipt this Period 30.00
City Wheat Ridge	State CO	Zip Code 80033
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	305.00
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 860 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Diana L. Kasson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4060 Simms St
 City Wheat Ridge State CO Zip Code 80033
 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 ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241485
 Amount of Each Receipt this Period
 300.00

B. Ms. Mae E. Kastor
 Full Name (Last, First, Middle Initial)
 Mailing Address 2415 Boston Street
 City Baltimore State MD Zip Code 21224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Employed Social Worker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237743
 Amount of Each Receipt this Period
 25.00

C. Linda Katalenich
 Full Name (Last, First, Middle Initial)
 Mailing Address 9605 S 9th St
 City Bellevue State NE Zip Code 68147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235488
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
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 861 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Peter Katan
 Full Name (Last, First, Middle Initial)
 Mailing Address 2510 Kensington Gdns
 Unit 304
 City Ellicott City State MD Zip Code 21043
 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 ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4231079
 Amount of Each Receipt this Period
 25.00

B. John Katona
 Full Name (Last, First, Middle Initial)
 Mailing Address 21334 Valley Forge Circle
 City King Of Prussia State PA Zip Code 19406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236499
 Amount of Each Receipt this Period
 35.00

C. Gerry Kaufman
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 Amherst Road
 City New City State NY Zip Code 10956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231080
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	160.00
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 862 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patsy J. Kaup
 Full Name (Last, First, Middle Initial)
 Mailing Address 13137 Tablerock Drive
 City State Zip Code
 Kirkwood MO 63122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 253.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234028
 Amount of Each Receipt this Period
 20.00

B. Ms. Elizabeth Kean
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Starview Drive
 City State Zip Code
 Oakland CA 94618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 None None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237880
 Amount of Each Receipt this Period
 250.00

C. Ellen Keen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1133 NW 11 Ave #403
 City State Zip Code
 Portland OR 97209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 None None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228934
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 863 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ellen Keen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241486
Mailing Address 1133 NW 11 Ave #403		Amount of Each Receipt this Period 15.00
City Portland	State OR	Zip Code 97209
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) B. Elizabeth Keenan		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233675
Mailing Address 2852 Greenway Blvd.		Amount of Each Receipt this Period 20.00
City Falls Church	State VA	Zip Code 22042
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Mr. Robert Keenan		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238663
Mailing Address 23392 Bolivar		Amount of Each Receipt this Period 30.00
City Mission Viejo	State CA	Zip Code 92691
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 ▼ 290.00	

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 864 OF 2648
	<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)
EMILY's List

A. Ms. Suzanne C. Keers
Full Name (Last, First, Middle Initial)

Mailing Address 1946 W Potomac Ave

City Chicago State IL Zip Code 60622

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

Name of Employer Self Occupation Independent Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3960.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014

Transaction ID : 4242652

Amount of Each Receipt this Period
 1200.00

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

Mailing Address 189 Island View Court

City Homer State AK Zip Code 99603

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : 4238664

Amount of Each Receipt this Period
 50.00

C. Ms. Sharon M. Keigher
Full Name (Last, First, Middle Initial)

Mailing Address 1815 N Riverwalk Way

City Milwaukee State WI Zip Code 53212

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 ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4229816

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	1265.00
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 865 OF 2648
	<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)
EMILY's List

A. Ms. Sharon M. Keigher
 Full Name (Last, First, Middle Initial)
 Mailing Address 1815 N Riverwalk Way
 City Milwaukee State WI Zip Code 53212
 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 ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240689
 Amount of Each Receipt this Period
 15.00

B. Mary Jane Keim
 Full Name (Last, First, Middle Initial)
 Mailing Address 518 West Glenwood Avenue
 City Knoxville State TN Zip Code 37917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Clinical Socialworker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238665
 Amount of Each Receipt this Period
 35.00

C. Mrs. Joanne G Keith
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Barrier Reef Dr
 City Corona Del Mar State CA Zip Code 92625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238666
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 866 OF 2648
	<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)
EMILY's List

A. Cindy Kekacs
Full Name (Last, First, Middle Initial)

Mailing Address 125 Palm St

City Bangor State ME Zip Code 04401

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

Name of Employer Eastern Maine Medical Center Occupation Registered Nurse

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
 12 / 09 / 2014

Transaction ID : 4234127

Amount of Each Receipt this Period
25.00

B. Ms. Karen Kelleher
Full Name (Last, First, Middle Initial)

Mailing Address 800 M St Apt 3W

City Anchorage State AK Zip Code 99501

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

Name of Employer REQUESTED Occupation REQUESTED

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
 12 / 10 / 2014

Transaction ID : 4234298

Amount of Each Receipt this Period
500.00

C. Dr. Kathleen M Kelley
Full Name (Last, First, Middle Initial)

Mailing Address 5000 South Greenwood

City Chicago State IL Zip Code 60615

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

Name of Employer University Of Illinois At Chicago Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **695.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014

Transaction ID : 4227973

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 867 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Kathleen M Kelley
 Full Name (Last, First, Middle Initial)
 Mailing Address 5000 South Greenwood
 City Chicago State IL Zip Code 60615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Illinois At Chicago Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 695.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240711
 Amount of Each Receipt this Period
 25.00

B. Dr. Kathleen M Kelley
 Full Name (Last, First, Middle Initial)
 Mailing Address 5000 South Greenwood
 City Chicago State IL Zip Code 60615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Illinois At Chicago Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 695.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4244855
 Amount of Each Receipt this Period
 25.00

C. Dr. Kathleen M Kelley
 Full Name (Last, First, Middle Initial)
 Mailing Address 5000 South Greenwood
 City Chicago State IL Zip Code 60615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Illinois At Chicago Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 695.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2014
Transaction ID : 4239351
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 868 OF 2648
	<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)
EMILY's List

A. Mr. John Kelly
Full Name (Last, First, Middle Initial)

Mailing Address 1116 Pennway Dr

City Lansing	State MI	Zip Code 48910
-----------------	-------------	-------------------

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 ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4231879

Amount of Each Receipt this Period
20.00

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

Mailing Address 861 vermont Street

City San Francisco	State CA	Zip Code 94107
-----------------------	-------------	-------------------

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

Name of Employer None	Occupation 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
12	/	20	/	2014

Transaction ID : 4239319

Amount of Each Receipt this Period
25.00

C. Mr. Jason Kemp
Full Name (Last, First, Middle Initial)

Mailing Address 10 8th Ave

City Waterford	State CT	Zip Code 06385
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FEC ID number of contributing federal political committee. **C**

Name of Employer State Of Connecticut	Occupation Judicial Branch Employee
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4239941

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....	95.00
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 869 OF 2648
	<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)
EMILY's List

A. Judith Kemper
Full Name (Last, First, Middle Initial)
Mailing Address 114 Bennett Road

City	State	Zip Code
Aptos	CA	95003

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

Name of Employer	Occupation
None	Retired

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
12	/	16	/	2014

Transaction ID : 4244856

Amount of Each Receipt this Period

25.00

B. Ms. Jane Kendall
Full Name (Last, First, Middle Initial)
Mailing Address 3333 Cheswick Drive

City	State	Zip Code
Raleigh	NC	27609

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

Name of Employer	Occupation
Nc Center For Nonprofits	Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2014

Transaction ID : 4243488

Amount of Each Receipt this Period

200.00

C. Nancy Kendrick
Full Name (Last, First, Middle Initial)
Mailing Address 1110 Nishishin Trail NE

City	State	Zip Code
Monona	WI	53716

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

Name of Employer	Occupation
Kendrick Labs Inc	Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4231888

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional).....▶	245.00
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 870 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Betty G. Kenley
 Full Name (Last, First, Middle Initial)
 Mailing Address 7090 Covenant Woods Drive, Apt. I1
 City Mechanicsville State VA Zip Code 23111
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236585
 Amount of Each Receipt this Period
 50.00

B. Ms. Jane Kenner
 Full Name (Last, First, Middle Initial)
 Mailing Address 206 Chattanooga St.
 City San Francisco State CA Zip Code 94114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234150
 Amount of Each Receipt this Period
 40.00

C. Ms. Megan Keough
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Clark Lane
 City Rye State NY Zip Code 10580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Interior Decorator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231958
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 871 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Roberta T. Kerkam
 Full Name (Last, First, Middle Initial)
 Mailing Address 226 Washington Street
 City Duxbury State MA Zip Code 02332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer King & Bishop Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 313.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234718
 Amount of Each Receipt this Period
 188.00

B. J W Kerns
 Full Name (Last, First, Middle Initial)
 Mailing Address 137 Lost Acres Lane
 City Stephens City State VA Zip Code 22655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Front Royal Family Practice Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228938
 Amount of Each Receipt this Period
 50.00

C. J W Kerns
 Full Name (Last, First, Middle Initial)
 Mailing Address 137 Lost Acres Lane
 City Stephens City State VA Zip Code 22655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Front Royal Family Practice Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241629
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 288.00
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 872 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Sia Keskes
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 Waterside Plz Apt 22a
 City New York State NY Zip Code 10010
 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 ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234726
 Amount of Each Receipt this Period
 150.00

B. Ms. Julie Kessel
 Full Name (Last, First, Middle Initial)
 Mailing Address 851 35th Ave North
 City St Petersburg State FL Zip Code 33704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Occupation Physician Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229792
 Amount of Each Receipt this Period
 35.00

C. Ms. Julie Kessel
 Full Name (Last, First, Middle Initial)
 Mailing Address 851 35th Ave North
 City St Petersburg State FL Zip Code 33704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Occupation Physician Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239943
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	220.00
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 873 OF 2648
	<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)
EMILY's List

A. Ms. Janet Kessler
Full Name (Last, First, Middle Initial)

Mailing Address 100 E Bellevue Pl., Apt. 8A

City Chicago	State IL	Zip Code 60611
-----------------	-------------	-------------------

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

Name of Employer Caldwell Banker	Occupation Broker
-------------------------------------	----------------------

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
12	/	22	/	2014

Transaction ID : 4239535

Amount of Each Receipt this Period

300.00

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

Mailing Address 16013 W. 136th Street

City Olathe	State KS	Zip Code 66062
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228941

Amount of Each Receipt this Period

25.00

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

Mailing Address 16013 W. 136th Street

City Olathe	State KS	Zip Code 66062
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241489

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	350.00
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 874 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. David F. Keyes		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243295
Mailing Address 1270 NW 102nd Ave		Amount of Each Receipt this Period 25.00
City Portland	State OR	Zip Code 97229
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. David F. Keyes		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238671
Mailing Address 1270 NW 102nd Ave		Amount of Each Receipt this Period 35.00
City Portland	State OR	Zip Code 97229
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Ms. Claire J Keyes		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236880
Mailing Address 12 Higgins Rd.		Amount of Each Receipt this Period 100.00
City Marblehead	State MA	Zip Code 01945
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Poet	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	160.00
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 875 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Dianne S. Kidwell
 Full Name (Last, First, Middle Initial)
 Mailing Address 442 Summit St
 City State Zip Code
 Ridgewood NJ 07450
 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 ▼
 287.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4230217
 Amount of Each Receipt this Period
 10.00

B. Ms. Dianne S. Kidwell
 Full Name (Last, First, Middle Initial)
 Mailing Address 442 Summit St
 City State Zip Code
 Ridgewood NJ 07450
 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 ▼
 287.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4244884
 Amount of Each Receipt this Period
 11.00

C. Ms. Dianne S. Kidwell
 Full Name (Last, First, Middle Initial)
 Mailing Address 442 Summit St
 City State Zip Code
 Ridgewood NJ 07450
 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 ▼
 287.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239128
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 36.00
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 876 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patti Kile
 Full Name (Last, First, Middle Initial)
 Mailing Address E3412 Bunker Rd.
 City Waupaca State WI Zip Code 54981
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Thedacare Physicians Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **700.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234322
 Amount of Each Receipt this Period
150.00

B. Ms. Lucy Killeen
 Full Name (Last, First, Middle Initial)
 Mailing Address 10231 W. Brookside Dr.
 City Sun City State AZ Zip Code 85351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243183
 Amount of Each Receipt this Period
75.00

C. Cheryl Killian
 Full Name (Last, First, Middle Initial)
 Mailing Address 3801 Woodside Dr
 City Arlington State TX Zip Code 76016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Legacy Care Centers, Inc Occupation Nursing Home Administrator/Ceo
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239205
 Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....	250.00
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 877 OF 2648
	(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)
EMILY's List

A. Ms. Elsie Kilvert
Full Name (Last, First, Middle Initial)
Mailing Address 525 E. 82nd Street Apt. 10-G
City New York State NY Zip Code 10028
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 ▼ 377.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228943
Amount of Each Receipt this Period
29.00

B. Ms. Elsie Kilvert
Full Name (Last, First, Middle Initial)
Mailing Address 525 E. 82nd Street Apt. 10-G
City New York State NY Zip Code 10028
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 ▼ 377.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4242137
Amount of Each Receipt this Period
29.00

C. Ms. Anne Kimball
Full Name (Last, First, Middle Initial)
Mailing Address 14890 David Drive
City Fort Myers State FL Zip Code 33908
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2014
Transaction ID : 4233404
Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	208.00
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 878 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Faye Kimerling		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014
Mailing Address P.O. Box 279		Transaction ID : 4239687
City Ardsley On Hudson	State NY	Zip Code 10503
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer self	Occupation career counselor- retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3350.00	

Full Name (Last, First, Middle Initial) B. Ms. Ann Kindberg		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014
Mailing Address 14615 Weddington St		Transaction ID : 4235212
City Sherman Oaks	State CA	Zip Code 91411
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Self Employed	Occupation TV Producer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Mr. Charles King		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014
Mailing Address 3061 Fairfax Road		Transaction ID : 4230558
City Cleveland Heights	State OH	Zip Code 44118
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer Cnse Western Reserve University	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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 879 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jane C. King
 Full Name (Last, First, Middle Initial)
 Mailing Address 431 Sawgrass Hill Ct
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Freedom Mortgage Corporation Occupation Mortgage Banker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236291
 Amount of Each Receipt this Period
 100.00

B. Nancy King
 Full Name (Last, First, Middle Initial)
 Mailing Address 6324 W 2nd St.
 City Rio Linda State CA Zip Code 95673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228945
 Amount of Each Receipt this Period
 20.00

C. Nancy King
 Full Name (Last, First, Middle Initial)
 Mailing Address 6324 W 2nd St.
 City Rio Linda State CA Zip Code 95673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241491
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 880 OF 2648
	<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)
EMILY's List

A. Ms. Belinda King
Full Name (Last, First, Middle Initial)
Mailing Address 2119 Riverlawn Dr.
City Kingwood State TX Zip Code 77339
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2014
Transaction ID : 4232440
Amount of Each Receipt this Period
10.00

B. Ms. Belinda King
Full Name (Last, First, Middle Initial)
Mailing Address 2119 Riverlawn Dr.
City Kingwood State TX Zip Code 77339
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2014
Transaction ID : 4229572
Amount of Each Receipt this Period
15.00

C. Ms. Belinda King
Full Name (Last, First, Middle Initial)
Mailing Address 2119 Riverlawn Dr.
City Kingwood State TX Zip Code 77339
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241490
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00
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 881 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Charlotte Ludlow King
 Full Name (Last, First, Middle Initial)
 Mailing Address 405 Plumbridge Ct Unit 202
 City Lutherville Timonium State MD Zip Code 21093
 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 ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227574
 Amount of Each Receipt this Period
 250.00

B. Ms. Eva M. King
 Full Name (Last, First, Middle Initial)
 Mailing Address 1806 Colfax St.
 City Concord State CA Zip Code 94520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Hairdresser
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228347
 Amount of Each Receipt this Period
 30.00

C. Ms. Eva M. King
 Full Name (Last, First, Middle Initial)
 Mailing Address 1806 Colfax St.
 City Concord State CA Zip Code 94520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Hairdresser
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241183
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 310.00
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 882 OF 2648
	<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)
EMILY's List

A. Dr. Mary Lou King
Full Name (Last, First, Middle Initial)

Mailing Address 3240 Morris Lane

City Miami State FL Zip Code 33133

FEC ID number of contributing federal political committee. **C**

Name of Employer Univ Of Miami Sch Of Med Occupation Professor/Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014

Transaction ID : 4229613

Amount of Each Receipt this Period
 35.00

B. Dr. Mary Lou King
Full Name (Last, First, Middle Initial)

Mailing Address 3240 Morris Lane

City Miami State FL Zip Code 33133

FEC ID number of contributing federal political committee. **C**

Name of Employer Univ Of Miami Sch Of Med Occupation Professor/Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4241655

Amount of Each Receipt this Period
 35.00

C. Ms. Ellen H. King
Full Name (Last, First, Middle Initial)

Mailing Address 10155 Malcolm Dr

City Covington State GA Zip Code 30014

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

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
 12 / 11 / 2014

Transaction ID : 4234729

Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 195.00

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 883 OF 2648
	<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	

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)
EMILY's List

A. Ms. Emily Kingsley
Full Name (Last, First, Middle Initial)

Mailing Address 12 Justine Court

City Briarcliff Manor State NY Zip Code 10510

FEC ID number of contributing federal political committee. **C**

Name of Employer Sesame Workshop Occupation Writer Sesame Street

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2014

Transaction ID : 4239141

Amount of Each Receipt this Period
100.00

B. Jordan Kinkead
Full Name (Last, First, Middle Initial)

Mailing Address 569 Shasta Drive

City Encinitas State CA Zip Code 92024

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1020.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2014

Transaction ID : 4233558

Amount of Each Receipt this Period
10.00

C. Mr. John F Kirk
Full Name (Last, First, Middle Initial)

Mailing Address 652 Edith Way

City Long Beach State CA Zip Code 90807

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : 4229741

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **120.00**

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 884 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. John F Kirk		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014
Mailing Address 652 Edith Way		Transaction ID : 4240488
City Long Beach	State CA	Zip Code 90807
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Full Name (Last, First, Middle Initial) B. Ms. Edie Dorosin Kirkwood		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014
Mailing Address 1221 Waverley Street		Transaction ID : 4231747
City Palo Alto	State CA	Zip Code 94301
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 350.00	
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 ▼ 3150.00	

Full Name (Last, First, Middle Initial) C. Dr. Susan S. Kirschenbaum		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014
Mailing Address 1783 South Rd.		Transaction ID : 4236992
City Kingston	State RI	Zip Code 02881
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer U.S. Navy, NVWC	Occupation Eng. Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	460.00
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 885 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Barbara Kirsh		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234056
Mailing Address 217 Burd St.		Amount of Each Receipt this Period 20.00
City Pennington	State NJ	Zip Code 08534
FEC ID number of contributing federal political committee. C		
Name of Employer Ets	Occupation Sociologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

Full Name (Last, First, Middle Initial) B. Catharine Kiser		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228950
Mailing Address 45 E 62nd St Apt 3b		Amount of Each Receipt this Period 100.00
City New York	State NY	Zip Code 10065
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3050.00	

Full Name (Last, First, Middle Initial) C. Catharine Kiser		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241492
Mailing Address 45 E 62nd St Apt 3b		Amount of Each Receipt this Period 100.00
City New York	State NY	Zip Code 10065
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3050.00	

SUBTOTAL of Receipts This Page (optional).....▶	220.00
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 886 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Catharine Kiser		Date of Receipt 12 / 10 / 2014 Transaction ID : 4234446
Mailing Address 45 E 62nd St Apt 3b		Amount of Each Receipt this Period 250.00
City New York	State NY	Zip Code 10065
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3050.00	

Full Name (Last, First, Middle Initial) B. Ms. Beverly P. Kivel		Date of Receipt 12 / 02 / 2014 Transaction ID : 4231452
Mailing Address 1813 Wales Drve		Amount of Each Receipt this Period 150.00
City Walnut Creek	State CA	Zip Code 94595
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 ▼ 1400.00	

Full Name (Last, First, Middle Initial) C. Ms. Kimiko Klein		Date of Receipt 11 / 28 / 2014 Transaction ID : 4228952
Mailing Address 403 Main Street, Unit 312		Amount of Each Receipt this Period 25.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional).....▶	425.00
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 887 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kimiko Klein		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241494
Mailing Address 403 Main Street, Unit 312		Amount of Each Receipt this Period 25.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 275.00
Name of Employer None	Occupation None	Aggregate Year-to-Date ▼ 275.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Nancy K. Klein		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 04 / 2014 Transaction ID : 4232302
Mailing Address 13800 Shaker Blvd, Apt. 708 Apt. 708		Amount of Each Receipt this Period 100.00
City Cleveland	State OH	Zip Code 44120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation Retired	Aggregate Year-to-Date ▼ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Patricia A. Klein		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238677
Mailing Address 8 Old Witch Ct.		Amount of Each Receipt this Period 50.00
City Norwalk	State CT	Zip Code 06853
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 605.00
Name of Employer Self	Occupation Clinical Social Worker	Aggregate Year-to-Date ▼ 605.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 888 OF 2648
	<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)
EMILY's List

A. Ms. Heather S. Kleiner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1061 Greystone Ln. W.
 City State Zip Code
 Watkinsville GA 30677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230563
 Amount of Each Receipt this Period
 50.00

B. Ms. Alice A. Kleinhans
 Full Name (Last, First, Middle Initial)
 Mailing Address 45 North Street
 City State Zip Code
 Andover MA 01810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233272
 Amount of Each Receipt this Period
 200.00

C. Mr. Jack Kleinkopf
 Full Name (Last, First, Middle Initial)
 Mailing Address 191 S.E. Mill Creek Rdg. E.
 City State Zip Code
 Shelton WA 98584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227980
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	270.00
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 890 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Tonya Klopp
 Full Name (Last, First, Middle Initial)
 Mailing Address 6023 Feagan Street
 City Houston State TX Zip Code 77007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 11 / 28 / 2014
Transaction ID : 4228955
 Amount of Each Receipt this Period
 50.00

B. Eliza Kellogg Klose
 Full Name (Last, First, Middle Initial)
 Mailing Address 178 Knibloe Hill Road
 City Sharon State CT Zip Code 06069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 11 / 27 / 2014
Transaction ID : 4228323
 Amount of Each Receipt this Period
 15.00

C. Eliza Kellogg Klose
 Full Name (Last, First, Middle Initial)
 Mailing Address 178 Knibloe Hill Road
 City Sharon State CT Zip Code 06069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 12 / 27 / 2014
Transaction ID : 4241167
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 891 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Simone Klugman
 Full Name (Last, First, Middle Initial)
 Mailing Address 6012 Margarido Drive
 City State Zip Code
 Oakland CA 94618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 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
 12 / 22 / 2014
Transaction ID : 4238286
 Amount of Each Receipt this Period
 150.00

B. Louise Knapp
 Full Name (Last, First, Middle Initial)
 Mailing Address 750 13th St
 City State Zip Code
 Boulder CO 80302
 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 ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237139
 Amount of Each Receipt this Period
 35.00

C. Ms. Jane Kniffin
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 476
 City State Zip Code
 Weaverville NC 28787
 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 ▼
 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229555
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 195.00
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 892 OF 2648
	<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)
EMILY's List

A. Ms. Jane Kniffin
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 476

City Weaverville	State NC	Zip Code 28787
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

Date of Receipt
12 / 28 / 2014
Transaction ID : 4241496

Amount of Each Receipt this Period
10.00

B. Ms. Doris R. Knight
Full Name (Last, First, Middle Initial)
Mailing Address 7401 Sycamore St.

City Jacksonville	State FL	Zip Code 32219
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 ▼ 253.00	

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231544

Amount of Each Receipt this Period
50.00

C. Ms. Margaret S Knoepfle
Full Name (Last, First, Middle Initial)
Mailing Address 1700 W. Washington St., Apt. B402

City Springfield	State IL	Zip Code 62702
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 ▼ 260.00	

Date of Receipt
12 / 06 / 2014
Transaction ID : 4232409

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 893 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Charles E. Knotts
 Full Name (Last, First, Middle Initial)
 Mailing Address 180 N. Edenfield Ave.
 City Azusa State CA Zip Code 91702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer La Dbs Occupation Inspector
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228958
 Amount of Each Receipt this Period
 10.00

B. Charles E. Knotts
 Full Name (Last, First, Middle Initial)
 Mailing Address 180 N. Edenfield Ave.
 City Azusa State CA Zip Code 91702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer La Dbs Occupation Inspector
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242141
 Amount of Each Receipt this Period
 10.00

C. Ms. Mary Tyler Knowles
 Full Name (Last, First, Middle Initial)
 Mailing Address 218 Cedar St.
 City Dedham State MA Zip Code 02026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236292
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 894 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dana Knowles			Date of Receipt
Mailing Address 900 W 34th St			<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4229724
Los Angeles	CA	90007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="40.00"/>
Name of Employer	Occupation		Aggregate Year-to-Date ▼
Usc	Mgr. Film Services		
Receipt For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
			<input type="text" value="360.00"/>

Full Name (Last, First, Middle Initial) B. Dana Knowles			Date of Receipt
Mailing Address 900 W 34th St			<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4240805
Los Angeles	CA	90007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="40.00"/>
Name of Employer	Occupation		Aggregate Year-to-Date ▼
Usc	Mgr. Film Services		
Receipt For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
			<input type="text" value="360.00"/>

Full Name (Last, First, Middle Initial) C. Paul Knutson			Date of Receipt
Mailing Address 4759 West Hwy 14			<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4230126
Owatonna	MN	55060	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="30.00"/>
Name of Employer	Occupation		Aggregate Year-to-Date ▼
Self	Farming		
Receipt For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
			<input type="text" value="350.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="110.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 895 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Paul Knutson		Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240774
Mailing Address 4759 West Hwy 14		Amount of Each Receipt this Period 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 30.00
City Owatonna	State MN	Zip Code 55060
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Farming	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 350.00	

Full Name (Last, First, Middle Initial) B. Lisa Koch		Date of Receipt M M / D D / Y Y Y Y 11 / 30 / 2014 Transaction ID : 4229593
Mailing Address 7031 16th Ave SW		Amount of Each Receipt this Period 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 20.00
City Seattle	State WA	Zip Code 98106
FEC ID number of contributing federal political committee. C		
Name of Employer Tongueinchi Productions	Occupation Musician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 735.00	

Full Name (Last, First, Middle Initial) C. Lisa Koch		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241378
Mailing Address 7031 16th Ave SW		Amount of Each Receipt this Period 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 20.00
City Seattle	State WA	Zip Code 98106
FEC ID number of contributing federal political committee. C		
Name of Employer Tongueinchi Productions	Occupation Musician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 735.00	

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 896 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Lisa Koch
 Full Name (Last, First, Middle Initial)
 Mailing Address 7031 16th Ave SW
 City State Zip Code
 Seattle WA 98106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Tongueinchi Productions Musician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 735.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235754
 Amount of Each Receipt this Period
 50.00

B. Mary Koczorowski
 Full Name (Last, First, Middle Initial)
 Mailing Address 322 W Belden Avenue
 City State Zip Code
 Chicago IL 60614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 43rd Ward Democrats Political Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4236032
 Amount of Each Receipt this Period
 20.00

C. Ms. Susan Koehler
 Full Name (Last, First, Middle Initial)
 Mailing Address 11432 Balfour Drive
 City State Zip Code
 Fenton MI 48430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230083
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 897 OF 2648
	<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)
EMILY's List

A. Ms. Susan Koehler
Full Name (Last, First, Middle Initial)
Mailing Address 11432 Balfour Drive
City Fenton State MI Zip Code 48430
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **270.00**

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240714
Amount of Each Receipt this Period
20.00

B. Mr. Leonard Koel
Full Name (Last, First, Middle Initial)
Mailing Address 804 Desert Marigold Court
City Bernalillo State NM Zip Code 87004
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 **360.00**

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232833
Amount of Each Receipt this Period
15.00

C. Mr. Leonard Koel
Full Name (Last, First, Middle Initial)
Mailing Address 804 Desert Marigold Court
City Bernalillo State NM Zip Code 87004
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 **360.00**

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238682
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... **50.00**
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 898 OF 2648
	<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)
EMILY's List

A. Mrs. Nancy G. Koenigsberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 435 East 57th Street
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 328.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239949
 Amount of Each Receipt this Period
 15.00

B. Mr. Ronald Kohanski
 Full Name (Last, First, Middle Initial)
 Mailing Address 6085 Covington Rd
 City Columbia State MD Zip Code 21044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 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
 12 / 11 / 2014
Transaction ID : 4244749
 Amount of Each Receipt this Period
 25.00

C. Mr. Charles Byron Kohr
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 Sunlit Dr., W
 City Santa Fe State NM Zip Code 87508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231679
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 899 OF 2648
	<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)
EMILY's List

A. Ms. Susan J. Kohut
Full Name (Last, First, Middle Initial)

Mailing Address 4455 Oakdale Crescent Court
Apt. # 317

City State Zip Code
Fairfax VA 22030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cbgr3, L.L.C. President & Ceo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
755.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 4228959

Amount of Each Receipt this Period
50.00

B. Ms. Susan J. Kohut
Full Name (Last, First, Middle Initial)

Mailing Address 4455 Oakdale Crescent Court
Apt. # 317

City State Zip Code
Fairfax VA 22030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cbgr3, L.L.C. President & Ceo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
755.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014

Transaction ID : 4241638

Amount of Each Receipt this Period
50.00

C. Ms. Lois V. Kolasinski
Full Name (Last, First, Middle Initial)

Mailing Address 1661 Creek Run Dr.

City State Zip Code
Toledo OH 43614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
203.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : 4230050

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00

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 900 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Lois V. Kolasinski
 Full Name (Last, First, Middle Initial)
 Mailing Address 1661 Creek Run Dr.
 City Toledo State OH Zip Code 43614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239950
 Amount of Each Receipt this Period
 15.00

B. Ms. Sandra Kolb
 Full Name (Last, First, Middle Initial)
 Mailing Address 3817 Garfield Street NW
 City Washington State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232627
 Amount of Each Receipt this Period
 25.00

C. Ms. Sandra Kolb
 Full Name (Last, First, Middle Initial)
 Mailing Address 3817 Garfield Street NW
 City Washington State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236718
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 901 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Betty Hahneman Kolb

Mailing Address 1550 N Lake Shore Drive
#2A

City Chicago State IL Zip Code 60610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242676

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Angela Kolis

Mailing Address 9 Boulder Basin Ln

City Cora State WY Zip Code 82925

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sublette County, Wy Secretary

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
 12 / 19 / 2014
Transaction ID : 4238683

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Ms. Sandra S. Koller

Mailing Address 12235 W 61st Ave

City Arvada State CO Zip Code 80004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Homemaker

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
 12 / 01 / 2014
Transaction ID : 4230565

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 295.00

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 902 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cynthia A. Kondon		Date of Receipt
Mailing Address 29910 Avenida Anillo		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Rancho Palos Verdes	CA	90275
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>
		Transaction ID : 4230566

Full Name (Last, First, Middle Initial) B. Ms. Judy Konisky		Date of Receipt
Mailing Address 3608 Mathias Way		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Verona	WI	53593
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="350.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
		Transaction ID : 4237373

Full Name (Last, First, Middle Initial) C. Ms. Joan Konner		Date of Receipt
Mailing Address 200 Central Park S Apt 33b		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
New York	NY	10019
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1500.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
		Transaction ID : 4233784

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 903 OF 2648
	<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)
EMILY's List

A. Kathleen Kopf
Full Name (Last, First, Middle Initial)
Mailing Address 280 Elk Run Rd.
City New Castle State CO Zip Code 81647
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4228960
Amount of Each Receipt this Period
20.00

B. Kathleen Kopf
Full Name (Last, First, Middle Initial)
Mailing Address 280 Elk Run Rd.
City New Castle State CO Zip Code 81647
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241497
Amount of Each Receipt this Period
20.00

C. Mary McLaughlin Koprowski
Full Name (Last, First, Middle Initial)
Mailing Address 115wynleigh Drive East
City Greenville State DE Zip Code 19807
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
M M / D D / Y Y Y Y Y
12 / 18 / 2014
Transaction ID : 4238244
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00
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 904 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Eleanor Koravos		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228961
Mailing Address 117 High St		Amount of Each Receipt this Period 25.00
City Lowell	State MA	Zip Code 01852
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Eleanor Koravos		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241498
Mailing Address 117 High St		Amount of Each Receipt this Period 25.00
City Lowell	State MA	Zip Code 01852
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Ms. Linda A. Korbel		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230568
Mailing Address 909 E Kenilworth Ave Unit 105		Amount of Each Receipt this Period 150.00
City Palatine	State IL	Zip Code 60074
FEC ID number of contributing federal political committee. C		
Name of Employer Oakton Community College	Occupation Dean	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 905 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Elina Koretsky		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014
Mailing Address 727 Borello Way		Transaction ID : 4235710
City Mountain View	State CA	Zip Code 94041
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Jfcs	Occupation Community Outreach	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Ms. Ursula Korneitchouk		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014
Mailing Address 2330 Euclid Heights Blvd Apt. 202		Transaction ID : 4234286
City Cleveland	State OH	Zip Code 44106
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

Full Name (Last, First, Middle Initial) C. Ms. Ursula Korneitchouk		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014
Mailing Address 2330 Euclid Heights Blvd Apt. 202		Transaction ID : 4227982
City Cleveland	State OH	Zip Code 44106
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 906 OF 2648
	<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)
EMILY's List

A. Ms. Ursula Korneit chouk
 Full Name (Last, First, Middle Initial)
 Mailing Address 2330 Euclid Heights Blvd
 Apt. 202
 City Cleveland State OH Zip Code 44106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240808
 Amount of Each Receipt this Period
 35.00

B. Ms. Melissa Sue Kort
 Full Name (Last, First, Middle Initial)
 Mailing Address 2144 Beverly Way
 City Santa Rosa State CA Zip Code 95404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Santa Rosa Jr. College Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227690
 Amount of Each Receipt this Period
 100.00

C. June Koss
 Full Name (Last, First, Middle Initial)
 Mailing Address 1974 Sebring Hills Dr
 City Henderson State NV Zip Code 89052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefits Group Worldwide, Inc. Occupation Client Service Manager
 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 / 28 / 2014
Transaction ID : 4228962
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	160.00
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 907 OF 2648
	<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	

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)
EMILY's List

A. June Koss
Full Name (Last, First, Middle Initial)
Mailing Address 1974 Sebring Hills Dr
City Henderson State NV Zip Code 89052
FEC ID number of contributing federal political committee. **C**
Name of Employer Benefits Group Worldwide, Inc. Occupation Client Service Manager
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt
12 / 28 / 2014
Transaction ID : 4242142
Amount of Each Receipt this Period
250.00

B. Ms. Lucy Kostelanetz
Full Name (Last, First, Middle Initial)
Mailing Address 310 Riverside Dr Apt 312
City New York State NY Zip Code 10025
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Filmmaker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt
12 / 02 / 2014
Transaction ID : 4231087
Amount of Each Receipt this Period
150.00

C. Kathryn Kostic
Full Name (Last, First, Middle Initial)
Mailing Address 4423 W Country View Dr
City Mequon State WI Zip Code 53092
FEC ID number of contributing federal political committee. **C**
Name of Employer Aurora Healthcare Occupation Physician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1050.00**

Date of Receipt
12 / 01 / 2014
Transaction ID : 4231088
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... **425.00**
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 908 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Christin Kostoff		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2014 Transaction ID : 4232450
Mailing Address 4240 Leafwood Circle E.		Amount of Each Receipt this Period 400.00
City Santa Rosa	State CA	Zip Code 95405
FEC ID number of contributing federal political committee. C		
Name of Employer County	Occupation Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Yana Kotlar		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4229825
Mailing Address 96 Bay State Rd		Amount of Each Receipt this Period 10.00
City Boston	State MA	Zip Code 02215
FEC ID number of contributing federal political committee. C		
Name of Employer Graduate Student	Occupation Social Work	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) C. Yana Kotlar		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237698
Mailing Address 96 Bay State Rd		Amount of Each Receipt this Period 10.00
City Boston	State MA	Zip Code 02215
FEC ID number of contributing federal political committee. C		
Name of Employer Graduate Student	Occupation Social Work	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 909 OF 2648
	(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

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Yana Kotlar		Date of Receipt M M / D D / Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240615
Mailing Address 96 Bay State Rd		Amount of Each Receipt this Period 10.00
City Boston	State MA	Zip Code 02215
FEC ID number of contributing federal political committee. C		
Name of Employer Graduate Student	Occupation Social Work	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) B. Linda Kovach		Date of Receipt M M / D D / Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228963
Mailing Address 8816 Yuba Cir Unit 1110b		Amount of Each Receipt this Period 25.00
City Huntington Beach	State CA	Zip Code 92646
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Linda Kovach		Date of Receipt M M / D D / Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242143
Mailing Address 8816 Yuba Cir Unit 1110b		Amount of Each Receipt this Period 25.00
City Huntington Beach	State CA	Zip Code 92646
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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 910 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Betty P. Kowaloff
 Full Name (Last, First, Middle Initial)
 Mailing Address 1261 Madison Ave.
 Apt 3 South
 City New York State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241499
 Amount of Each Receipt this Period
 50.00

B. Gary Kozan
 Full Name (Last, First, Middle Initial)
 Mailing Address 15555chandelle PI
 City Wellington State FL Zip Code 33414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Contractor
 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
 12 / 01 / 2014
Transaction ID : 4230570
 Amount of Each Receipt this Period
 150.00

C. Ms. H. Jean Kraft
 Full Name (Last, First, Middle Initial)
 Mailing Address 508 Weir Road
 City Upper Chichester State PA Zip Code 19014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230571
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 911 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Judith Kraft

Mailing Address 235 Burnside Pl.

City Ridgewood	State NJ	Zip Code 07450
-------------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	15	/	2014

Transaction ID : 4236736

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Jenn Kraft

Mailing Address 14 Knights Court

City Upper Saddle River	State NJ	Zip Code 07458
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
-------------------------------	-------------------------

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
12	/	08	/	2014

Transaction ID : 4233729

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Ms. Margaret J Krahenbuhk

Mailing Address 13200 Hugh Graham Rd NE

City Albuquerque	State NM	Zip Code 87111
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2014

Transaction ID : 4233393

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 912 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Margaret J Krahenbuhk		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239952
Mailing Address 13200 Hugh Graham Rd NE		Amount of Each Receipt this Period 25.00
City Albuquerque	State NM	Zip Code 87111
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Ms. Virginia M. Krall		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227444
Mailing Address 3038 SE 21st St.		Amount of Each Receipt this Period 100.00
City Gresham	State OR	Zip Code 97080
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 ▼ 775.00	

Full Name (Last, First, Middle Initial) C. Jacqueline Kramer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2014 Transaction ID : 4238305
Mailing Address 19201 Twin Oaks Lane		Amount of Each Receipt this Period 25.00
City Sonoma	State CA	Zip Code 95476
FEC ID number of contributing federal political committee. C		
Name of Employer Hearth Foundation	Occupation director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 913 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Paul Kramer
 Full Name (Last, First, Middle Initial)
 Mailing Address 5930 E. Kenyon Ave.
 City State Zip Code
 Denver CO 80237
 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 ▼
 418.19

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237881
 Amount of Each Receipt this Period
 25.00

B. Gregory Kramer
 Full Name (Last, First, Middle Initial)
 Mailing Address 494 Mill Creek Rd
 City State Zip Code
 Kingsport TN 37664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 17 / 2014
Transaction ID : 4237762
 Amount of Each Receipt this Period
 25.00

C. Eunice Kramer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Emerald Street
 City State Zip Code
 Redondo Beach CA 90277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228964
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 914 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Eunice Kramer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Emerald Street
 City Redondo Beach State CA Zip Code 90277
 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 ▼ 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241726
 Amount of Each Receipt this Period
 10.00

B. Ms. Martha Culbert Kramer
 Full Name (Last, First, Middle Initial)
 Mailing Address 8710 Midnight Pass Road
 City Sarasota State FL Zip Code 34242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230572
 Amount of Each Receipt this Period
 75.00

C. Dr. Judith A. Kramer
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Willow Ct
 City Shrewsbury State NJ Zip Code 07702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4235011
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
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 915 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Kathy Krauskopf
 Full Name (Last, First, Middle Initial)
 Mailing Address 26099 York Rd.
 City Huntington Woods State MI Zip Code 48070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 12 / 01 / 2014
Transaction ID : 4230573
 Amount of Each Receipt this Period
 125.00

B. Eleanore Krausse
 Full Name (Last, First, Middle Initial)
 Mailing Address 1239 Tubbs Lane #B
 City Calistoga State CA Zip Code 94515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 12 / 06 / 2014
Transaction ID : 4232503
 Amount of Each Receipt this Period
 30.00

C. Miss Paulina C. Kreger
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 188
 City Redding Ridge State CT Zip Code 06876
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231089
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	305.00
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 916 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Mrs. Maureen Elise Kremers
 Full Name (Last, First, Middle Initial)
 Mailing Address 2020 East Lynn St
 City Seattle State WA Zip Code 98112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237781
 Amount of Each Receipt this Period
25.00

B. Mrs. Maureen Elise Kremers
 Full Name (Last, First, Middle Initial)
 Mailing Address 2020 East Lynn St
 City Seattle State WA Zip Code 98112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236124
 Amount of Each Receipt this Period
100.00

C. Karen R. Kretchmar
 Full Name (Last, First, Middle Initial)
 Mailing Address 3036 High Range Drive
 City Las Vegas State NV Zip Code 89134
 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 **505.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237400
 Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 917 OF 2648
	<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)
EMILY's List

A. Ms. Reva Kriegel
Full Name (Last, First, Middle Initial)
Mailing Address 266 South Front Street, Suite 206

City Memphis	State TN	Zip Code 38103
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Date of Receipt
12 / 13 / 2014
Transaction ID : 4236293
Amount of Each Receipt this Period
15.00

B. Ms. Reva Kriegel
Full Name (Last, First, Middle Initial)
Mailing Address 266 South Front Street, Suite 206

City Memphis	State TN	Zip Code 38103
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231890
Amount of Each Receipt this Period
20.00

C. Anahid Krikorian
Full Name (Last, First, Middle Initial)
Mailing Address 43 Rosewood Dr

City Lakewood	State NJ	Zip Code 08701
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239954
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 918 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Elizabeth Krome		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228967
Mailing Address 2401 Forge Road		Amount of Each Receipt this Period 20.00
City Toano State VA Zip Code 23168	FEC ID number of contributing federal political committee. C	
Name of Employer Self Occupation Potter	Aggregate Year-to-Date 265.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Elizabeth Krome		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242146
Mailing Address 2401 Forge Road		Amount of Each Receipt this Period 20.00
City Toano State VA Zip Code 23168	FEC ID number of contributing federal political committee. C	
Name of Employer Self Occupation Potter	Aggregate Year-to-Date 265.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mary H. Kroninger		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228968
Mailing Address PO Box 500		Amount of Each Receipt this Period 15.00
City Inverness State CA Zip Code 94937	FEC ID number of contributing federal political committee. C	
Name of Employer REQUESTED Occupation REQUESTED	Aggregate Year-to-Date 280.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 919 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mary H. Kroninger
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 500
 City Inverness State CA Zip Code 94937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242147
 Amount of Each Receipt this Period
 15.00

B. Ms. Barbara D. Kroon
 Full Name (Last, First, Middle Initial)
 Mailing Address 1706 N.W. 66th Cir.
 City Vancouver State WA Zip Code 98663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235379
 Amount of Each Receipt this Period
 10.00

C. Martha Krow-Lucal
 Full Name (Last, First, Middle Initial)
 Mailing Address 468 Nuestra Ave
 City Sunnyvale State CA Zip Code 94086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4243033
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
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 920 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Elizabeth Kubaitis		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228969
Mailing Address 479 N Harlem Ave Apt 403		Amount of Each Receipt this Period 25.00
City Oak Park	State IL	Zip Code 60301
FEC ID number of contributing federal political committee. C	Name of Employer The Kubaitis Group	
Occupation Project Management Consultant		Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Elizabeth Kubaitis		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242148
Mailing Address 479 N Harlem Ave Apt 403		Amount of Each Receipt this Period 25.00
City Oak Park	State IL	Zip Code 60301
FEC ID number of contributing federal political committee. C	Name of Employer The Kubaitis Group	
Occupation Project Management Consultant		Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Diana W. Kubick		Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227984
Mailing Address 11 Songbird Ln		Amount of Each Receipt this Period 10.00
City Rochester	State NY	Zip Code 14620
FEC ID number of contributing federal political committee. C	Name of Employer Requested	
Occupation REQUESTED		Aggregate Year-to-Date ▼ 220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 921 OF 2648
	<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)
EMILY's List

A. Mrs. Diana W. Kubick
Full Name (Last, First, Middle Initial)

Mailing Address 11 Songbird Ln

City Rochester State NY Zip Code 14620

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014

Transaction ID : 4240530

Amount of Each Receipt this Period
 10.00

B. Mr. Scott Kubik
Full Name (Last, First, Middle Initial)

Mailing Address 59050 859 Rd

City Emerson State NE Zip Code 68733

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4239569

Amount of Each Receipt this Period
 100.00

C. Beverly Kubon
Full Name (Last, First, Middle Initial)

Mailing Address 1606 Paula Avenue

City Wheaton State IL Zip Code 60189

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : 4237192

Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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 922 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Donna Kuck

Mailing Address 1122 40th Street
Apt. 305

City Emeryville State CA Zip Code 94608

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 ▼
445.00

Date of Receipt
12 / 14 / 2014
Transaction ID : 4235489

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Ms. Kathryn Kuehl

Mailing Address 3400 Sullivan Court Apt.175

City Modesto State CA Zip Code 95356

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 ▼
675.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238689

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Ms. Kristin Kuhlmann

Mailing Address 1108 Gemini Circle

City Portales State NM Zip Code 88130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Enmu Health Services Director, Fnp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232826

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

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 923 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Estelle Kuhn
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 W. 68th St., Apt. 3b
 City New York State NY Zip Code 10023
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4243089
 Amount of Each Receipt this Period
 1000.00

B. Dr. Raminder Kumar
 Full Name (Last, First, Middle Initial)
 Mailing Address 445 E North Water St, Apt 2505
 City Chicago State IL Zip Code 60611
 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 ▼ 1085.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235553
 Amount of Each Receipt this Period
 15.00

C. Ms. Ruth I. Kunin
 Full Name (Last, First, Middle Initial)
 Mailing Address 470 W End Ave., Apt. 6A
 City New York State NY Zip Code 10024
 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 ▼ 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4226697
 Amount of Each Receipt this Period
 1200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2215.00
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 924 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patricia Kurauski
 Full Name (Last, First, Middle Initial)
 Mailing Address 4229 N Keystone Ave
 City Chicago State IL Zip Code 60641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4233949
 Amount of Each Receipt this Period
 50.00

B. Patricia Kurkul
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 Ship St
 City Newburyport State MA Zip Code 01950
 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 ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4233769
 Amount of Each Receipt this Period
 50.00

C. Ms. Gloria Kwei
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Kenilworth Ct.
 City Kensington State CA Zip Code 94707
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238691
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 925 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Verla R. Kwiram
 Full Name (Last, First, Middle Initial)
 Mailing Address 825 NW 197th St
 City Shoreline State WA Zip Code 98177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Self-Employed Business
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **360.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234620
 Amount of Each Receipt this Period
30.00

B. Ms. Sue Kyser
 Full Name (Last, First, Middle Initial)
 Mailing Address 9207 Claxton Dr.
 City Austin State TX Zip Code 78736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Homemaker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **230.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234315
 Amount of Each Receipt this Period
50.00

C. Norman La Cholter
 Full Name (Last, First, Middle Initial)
 Mailing Address 9342 Afternoon Lane
 City Columbia State MD Zip Code 21045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **203.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243250
 Amount of Each Receipt this Period
18.00

SUBTOTAL of Receipts This Page (optional)..... **98.00**
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 926 OF 2648
	<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)
EMILY's List

A. Ms. Sheila La Farge
Full Name (Last, First, Middle Initial)
Mailing Address 202 Winthrop Ter.
City Bedford State MA Zip Code 01730
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 435.00

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234173
Amount of Each Receipt this Period 35.00

B. Ms. Sheila La Farge
Full Name (Last, First, Middle Initial)
Mailing Address 202 Winthrop Ter.
City Bedford State MA Zip Code 01730
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 435.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238692
Amount of Each Receipt this Period 50.00

C. Ms. Irene Labelle
Full Name (Last, First, Middle Initial)
Mailing Address 1616 NW 27th Terrace
City Gainesville State FL Zip Code 32605
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231813
Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 927 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Verna Labrador
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 438
 City Reamstown State PA Zip Code 17567
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233659
 Amount of Each Receipt this Period
 25.00

B. Ms. Susan M. Lach
 Full Name (Last, First, Middle Initial)
 Mailing Address 15834 50th Ave. N.
 City Minneapolis State MN Zip Code 55446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tuft & Lach PLLC 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
 12 / 09 / 2014
Transaction ID : 4233846
 Amount of Each Receipt this Period
 125.00

C. Ms. Mae-Dell Lacy
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 734
 City Manhattan Beach State CA Zip Code 90267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234508
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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 928 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Alan Lager

Mailing Address 6585 Maggiore Drive

City State Zip Code
Boynton Beach FL 33472

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232718

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Ms. Diana Lager

Mailing Address 2921 Heather Bow

City State Zip Code
Sarasota FL 34235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

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
 12 / 15 / 2014
Transaction ID : 4236446

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
c. Ms. Catherine Lagreca

Mailing Address 1924 Elder Ave.

City State Zip Code
Morton PA 19070

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 ▼
548.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233971

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00

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 929 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Celinda C. Lake

Mailing Address 1726 M Street NW Suite 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Lake Research Partners Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : 4239390

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Ms. Carol Lakin

Mailing Address 918 E. Lizzie Lane

City Saint George State UT Zip Code 84790

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 ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231688

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Russell Lamarr

Mailing Address 71-35 Sutton Place
First Floor

City Fresh Meadows State NY Zip Code 11365

FEC ID number of contributing federal political committee. **C**

Name of Employer United Nations Occupation On Disability

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239955

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **345.00**

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 930 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Ann S. Lamb
 Full Name (Last, First, Middle Initial)
 Mailing Address 8713 Dunaire Dr
 City Knoxville State TN Zip Code 37923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lamb Enterprises, Llc Occupation Technical Editor, Business Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231605
 Amount of Each Receipt this Period
 100.00

B. Ms. Susan Lamb
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 W Keech Ave
 City Ann Arbor State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Antique Dealer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 12 / 05 / 2014
Transaction ID : 4233076
 Amount of Each Receipt this Period
 100.00

C. Ms. Ruth Lambert
 Full Name (Last, First, Middle Initial)
 Mailing Address 315 Whitney Ave Carriage Hse #8
 City New Haven State CT Zip Code 06511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 12 / 20 / 2014
Transaction ID : 4239272
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 931 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Catherine A. Lamboley
 Full Name (Last, First, Middle Initial)
 Mailing Address 2327 Seyborn Street
 City Houston State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4236988
 Amount of Each Receipt this Period
 1200.00

B. Jon Lamkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 5001 Woodwy Drive Unit 304
 City Houston State TX Zip Code 77056
 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 ▼
 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238694
 Amount of Each Receipt this Period
 35.00

C. Ms. Joan L. Lamnek
 Full Name (Last, First, Middle Initial)
 Mailing Address 1400 Hermann Unit 14C
 City Houston State TX Zip Code 77004
 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 ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4244742
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1285.00
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 932 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Ms. Claire G. Lampson
 Full Name (Last, First, Middle Initial)
 Mailing Address 18899 Independence Ln.
 City Geyserville State CA Zip Code 95441
 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 ▼ 1555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243205
 Amount of Each Receipt this Period
 100.00

B. Mrs. Merry Lance
 Full Name (Last, First, Middle Initial)
 Mailing Address 1502 E Centennial Dr # 208
 City Pittsburg State KS Zip Code 66762
 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 ▼ 865.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237543
 Amount of Each Receipt this Period
 230.00

C. Gordon Landis
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 Crescent Street
 City Stow State MA Zip Code 01775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Arris Group Occupation Computer Software
 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 / 28 / 2014
Transaction ID : 4228978
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	345.00
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 933 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Gordon Landis
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 Crescent Street
 City Stow State MA Zip Code 01775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Arris Group Occupation Computer Software
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 12 / 28 / 2014
Transaction ID : 4242153
 Amount of Each Receipt this Period
 15.00

B. Mr. William Landolfi
 Full Name (Last, First, Middle Initial)
 Mailing Address 520 East 81st Street Apartment 9K
 City New York State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 12 / 18 / 2014
Transaction ID : 4244872
 Amount of Each Receipt this Period
 30.00

C. Ms. Susan Landon
 Full Name (Last, First, Middle Initial)
 Mailing Address 4635 84th Av SE
 City Mercer Island State WA Zip Code 98040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3660.00

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4238695
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 934 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Carol Lane
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Linnaean Street
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230153
 Amount of Each Receipt this Period
 20.00

B. Ms. Carol Lane
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Linnaean Street
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239959
 Amount of Each Receipt this Period
 20.00

C. Mary M. Lane
 Full Name (Last, First, Middle Initial)
 Mailing Address 1107 S. Old Wilke
 City Arlington Heights State IL Zip Code 60005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234196
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 935 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Beth Lang
 Full Name (Last, First, Middle Initial)
 Mailing Address 73 Harbor Lane
 City Kemah State TX Zip Code 77565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243402
 Amount of Each Receipt this Period
 250.00

B. David Langford
 Full Name (Last, First, Middle Initial)
 Mailing Address 1221 S. Grant Ave
 City Tacoma State WA Zip Code 98405
 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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228979
 Amount of Each Receipt this Period
 25.00

C. David Langford
 Full Name (Last, First, Middle Initial)
 Mailing Address 1221 S. Grant Ave
 City Tacoma State WA Zip Code 98405
 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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242154
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 936 OF 2648
	<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)
EMILY's List

A. Mr. Ralph F. Langley
Full Name (Last, First, Middle Initial)

Mailing Address 389 Fremont St

City Upland State CA Zip Code 91784

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 ▼ 260.00

Date of Receipt
12 / 22 / 2014
Transaction ID : 4238289

Amount of Each Receipt this Period
50.00

B. John Langmaid
Full Name (Last, First, Middle Initial)

Mailing Address 2200 Main St

City Glastonbury State CT Zip Code 06033

FEC ID number of contributing federal political committee. **C**

Name of Employer State Of Connecticut Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231817

Amount of Each Receipt this Period
20.00

C. Jordan Langner
Full Name (Last, First, Middle Initial)

Mailing Address 46 Tamarack Drive

City Delmar State NY Zip Code 12054

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 ▼ 420.00

Date of Receipt
11 / 28 / 2014
Transaction ID : 4228980

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

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 937 OF 2648 (check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jordan Langner
Full Name (Last, First, Middle Initial)

Mailing Address 46 Tamarack Drive

City Delmar	State NY	Zip Code 12054
----------------	-------------	-------------------

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 ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4242155

Amount of Each Receipt this Period
50.00

B. Karen Lannigan
Full Name (Last, First, Middle Initial)

Mailing Address 130 Hill Crescent

City Calverton	State NY	Zip Code 11933
-------------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228981

Amount of Each Receipt this Period
50.00

C. Karen Lannigan
Full Name (Last, First, Middle Initial)

Mailing Address 130 Hill Crescent

City Calverton	State NY	Zip Code 11933
-------------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4242156

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 938 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Kathryn Lanoue

Mailing Address 330 Pulaski Pl

City State Zip Code
Dallastown PA 17313

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
840.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2014

Transaction ID : 4244761

Amount of Each Receipt this Period
70.00

Full Name (Last, First, Middle Initial)
B. Ms. Sue Lapin

Mailing Address 103 Overlook Drive

City State Zip Code
Media PA 19063

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lapin Systems, Llc Automation Engineer (Retired)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2014

Transaction ID : 4236295

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Ms. Patricia Y. Larkin

Mailing Address 5122 Newport Ave

City State Zip Code
Bethesda MD 20816

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Employed Organizer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : 4230048

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00

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 939 OF 2648
	<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)
EMILY's List

A. Ms. Patricia Y. Larkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 5122 Newport Ave
 City Bethesda State MD Zip Code 20816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Employed Organizer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 12 / 23 / 2014
Transaction ID : 4239963
 Amount of Each Receipt this Period
 15.00

B. Laura Larkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 469 Clifton Ave.
 City San Carlos State CA Zip Code 94070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Sequoia Union High School District Teacher
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4233474
 Amount of Each Receipt this Period
 20.00

C. Mr. William Larkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 W Lettle Creek Rd
 City Norfolk State VA Zip Code 23505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Requested Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4238041
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
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 940 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Aleynes Larner		Date of Receipt M M / D D / Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238697
Mailing Address 4124 East Almeria Rd		Amount of Each Receipt this Period 25.00
City Phoenix	State AZ	Zip Code 85008
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Joan A. Larsen		Date of Receipt M M / D D / Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233174
Mailing Address 174 County Route 35		Amount of Each Receipt this Period 100.00
City Canton	State NY	Zip Code 13617
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 ▼ 243.00	

Full Name (Last, First, Middle Initial) C. Ms. Diana Larsen-Mills		Date of Receipt M M / D D / Y Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236296
Mailing Address 1320 Evergreen Park Dr. SW #11		Amount of Each Receipt this Period 50.00
City Olympia	State WA	Zip Code 98502
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 ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 941 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Marjorie R Larson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227991
Mailing Address 12310 30th Ave N		Amount of Each Receipt this Period 15.00
City Plymouth	State MN	Zip Code 55441
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 213.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.00	

Full Name (Last, First, Middle Initial) B. Ms. Eleanor B. Larson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4234924
Mailing Address 4346 Via Presada		Amount of Each Receipt this Period 20.00
City Santa Barbara	State CA	Zip Code 93110
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 770.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	

Full Name (Last, First, Middle Initial) C. Jean Larson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228984
Mailing Address 2071 Locust Grove Road		Amount of Each Receipt this Period 25.00
City Batesville	State AR	Zip Code 72501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 360.00
Name of Employer Self	Occupation Chef	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 942 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jean Larson		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242159
Mailing Address 2071 Locust Grove Road		Amount of Each Receipt this Period 25.00
City Batesville	State AR	Zip Code 72501
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Chef	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Ms. Andrea Larson		Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230237
Mailing Address 3040 Waverly Dr		Amount of Each Receipt this Period 1000.00
City Charlottesville	State VA	Zip Code 22901
FEC ID number of contributing federal political committee. C		
Name of Employer Univ. Of Virginia	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Ms. Marilyn Larson		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2014 Transaction ID : 4235213
Mailing Address 407 S Norwood Ave		Amount of Each Receipt this Period 150.00
City Newtown	State PA	Zip Code 18940
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	1175.00
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 943 OF 2648
	<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)
EMILY's List

A. Dr. Joyce C Lashof
Full Name (Last, First, Middle Initial)

Mailing Address 2431 Mariner Square Dr.

City Alameda	State CA	Zip Code 94501
-----------------	-------------	-------------------

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 ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4228985

Amount of Each Receipt this Period

50.00

B. Dr. Joyce C Lashof
Full Name (Last, First, Middle Initial)

Mailing Address 2431 Mariner Square Dr.

City Alameda	State CA	Zip Code 94501
-----------------	-------------	-------------------

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 ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241728

Amount of Each Receipt this Period

50.00

C. Ms. Tanya Lasuk
Full Name (Last, First, Middle Initial)

Mailing Address 409 S.Agua Mansa Court

City Kennewick	State WA	Zip Code 99338
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4230186

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 944 OF 2648
	<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

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)
EMILY's List

A. Ms. Tanya Lasuk
Full Name (Last, First, Middle Initial)
Mailing Address 409 S.Agua Mansa Court
City Kennewick State WA Zip Code 99338
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239964
Amount of Each Receipt this Period
100.00

B. Lorely Lather
Full Name (Last, First, Middle Initial)
Mailing Address 20880 Private Drive 4361
City St James State MO Zip Code 65559
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 ▼ 206.00

Date of Receipt
12 / 10 / 2014
Transaction ID : 4234528
Amount of Each Receipt this Period
10.00

C. Lorely Lather
Full Name (Last, First, Middle Initial)
Mailing Address 20880 Private Drive 4361
City St James State MO Zip Code 65559
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 ▼ 206.00

Date of Receipt
12 / 18 / 2014
Transaction ID : 4238205
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 945 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Sally Lauben
 Full Name (Last, First, Middle Initial)
 Mailing Address 14320 Cantrell Rd
 City Silver Spring State MD Zip Code 20905
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228987
 Amount of Each Receipt this Period
 15.00

B. Ms. Sally Lauben
 Full Name (Last, First, Middle Initial)
 Mailing Address 14320 Cantrell Rd
 City Silver Spring State MD Zip Code 20905
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242161
 Amount of Each Receipt this Period
 15.00

C. Ms. Lois Lautenberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Lonergan Lane
 City West Orange State NJ Zip Code 07052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228988
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 946 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lois Lautenberg		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242162
Mailing Address 6 Lonergan Lane		Amount of Each Receipt this Period 20.00
City West Orange	State NJ	Zip Code 07052
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Mr. Roger W. Lavalley		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230577
Mailing Address 3672 Players Club DR SE		Amount of Each Receipt this Period 100.00
City Southport	State NC	Zip Code 28461
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Elaine C. Lavaute		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237730
Mailing Address 701 Pennsylvania Avenue Apt. 1		Amount of Each Receipt this Period 30.00
City Washington	State DC	Zip Code 20004
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 ▼ 456.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 947 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Murray L. Laver

Mailing Address 1950 S.W. Whiteside Dr.

City State Zip Code
Corvallis OR 97333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2125.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230578

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Mr. Murray L. Laver

Mailing Address 1950 S.W. Whiteside Dr.

City State Zip Code
Corvallis OR 97333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2125.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239532

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Mr. Murray L. Laver

Mailing Address 1950 S.W. Whiteside Dr.

City State Zip Code
Corvallis OR 97333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2125.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4242663

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 948 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Murray L. Laver
 Full Name (Last, First, Middle Initial)
 Mailing Address 1950 S.W. Whiteside Dr.
 City Corvallis State OR Zip Code 97333
 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 ▼ 2125.00

Date of Receipt
 12 / 30 / 2014
Transaction ID : 4242679
 Amount of Each Receipt this Period
 50.00

B. Mrs. Carol J. Lavick
 Full Name (Last, First, Middle Initial)
 Mailing Address 4512 N Bigelow St.
 City Peoria State IL Zip Code 61614
 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 ▼ 450.00

Date of Receipt
 12 / 01 / 2014
Transaction ID : 4230579
 Amount of Each Receipt this Period
 100.00

C. Ms. Ruth Lavine
 Full Name (Last, First, Middle Initial)
 Mailing Address 10560 Wilshire Blvd. Apt. 1703
 City Los Angeles State CA Zip Code 90024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231568
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00
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 949 OF 2648
	(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)
EMILY's List

A. Mr. Jack W. Lawrence
Full Name (Last, First, Middle Initial)

Mailing Address 22189 Madison

City State Zip Code
Saint Clair Shores MI 48081

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

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
12 / 08 / 2014
Transaction ID : 4233082

Amount of Each Receipt this Period
125.00

B. Mr. Jeff A. Lawrence
Full Name (Last, First, Middle Initial)

Mailing Address 848 Ridgeview Dr

City State Zip Code
Independence KS 67301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4230109

Amount of Each Receipt this Period
20.00

C. Mr. Jeff A. Lawrence
Full Name (Last, First, Middle Initial)

Mailing Address 848 Ridgeview Dr

City State Zip Code
Independence KS 67301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240735

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.00

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 950 OF 2648
	<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)
EMILY's List

A. Babs Lawyer
Full Name (Last, First, Middle Initial)
Mailing Address 703 E. Calhoun Street

City Macomb	State IL	Zip Code 61455
----------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y
12	/	02	/	2014

Transaction ID : 4231094

Amount of Each Receipt this Period
150.00

B. Ms. Lucile Layne
Full Name (Last, First, Middle Initial)
Mailing Address 13226 Old 12 Rd

City Tipton	State MO	Zip Code 65081
----------------	-------------	-------------------

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 ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230580

Amount of Each Receipt this Period
25.00

C. Dr. Aili L. Lazaar
Full Name (Last, First, Middle Initial)
Mailing Address 1640 Forest Creek Drive

City Blue Bell	State PA	Zip Code 19422
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer GSK	Occupation PHYSICIAN
-------------------------	-------------------------

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
12	/	04	/	2014

Transaction ID : 4232259

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	675.00
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 951 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Nancy Lazar

Mailing Address 20 Pierrepont Street #5C

City State Zip Code
Brooklyn NY 11201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Disabled Disabled

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4230218

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Nancy Lazar

Mailing Address 20 Pierrepont Street #5C

City State Zip Code
Brooklyn NY 11201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Disabled Disabled

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4244936

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Katherine Lazarus

Mailing Address 5 Gillman St.

City State Zip Code
Irvine CA 92612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229697

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 952 OF 2648
	<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)
EMILY's List

A. Katherine Lazarus
Full Name (Last, First, Middle Initial)
Mailing Address 5 Gillman St.
City Irvine State CA Zip Code 92612
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231875
Amount of Each Receipt this Period 25.00

B. Katherine Lazarus
Full Name (Last, First, Middle Initial)
Mailing Address 5 Gillman St.
City Irvine State CA Zip Code 92612
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238700
Amount of Each Receipt this Period 25.00

C. Katherine Lazarus
Full Name (Last, First, Middle Initial)
Mailing Address 5 Gillman St.
City Irvine State CA Zip Code 92612
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240709
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 953 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Myriam L. Le Cannellier		Date of Receipt
Mailing Address 1833 W Roscoe		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chicago	IL	60657
FEC ID number of contributing federal political committee.		Transaction ID : 4232600
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Dsml Executive Search	Co-Owner And Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="255.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Sharon W Leader		Date of Receipt
Mailing Address 5216 Atlanta St.		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
New Orleans	LA	70115
FEC ID number of contributing federal political committee.		Transaction ID : 4227353
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
S. W. Leader, Inc.	Transportation Consultant	
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. Ms. Mary Ryan Leahy		Date of Receipt
Mailing Address 1 Pleasant St		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Westford	MA	01886
FEC ID number of contributing federal political committee.		Transaction ID : 4234487
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	
Indian Hill Music	Development Manager	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="340.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="305.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 954 OF 2648
	<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

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)
EMILY's List

A. Lorie Lease
Full Name (Last, First, Middle Initial)
Mailing Address 107 Nicholas Ct
City Cotati State CA Zip Code 94931
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Accountant
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **240.00**

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233683
Amount of Each Receipt this Period
200.00

B. Ruth Eileen Leatherman
Full Name (Last, First, Middle Initial)
Mailing Address 1178 Idylberry Rd
City San Rafael State CA Zip Code 94903
FEC ID number of contributing federal political committee. **C**
Name of Employer Exploratorium Occupation Museum Administration
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt
12 / 03 / 2014
Transaction ID : 4232037
Amount of Each Receipt this Period
25.00

C. Robert Leavitt
Full Name (Last, First, Middle Initial)
Mailing Address 1739 Carita Ave
City Henderson State NV Zip Code 89014
FEC ID number of contributing federal political committee. **C**
Name of Employer College Of Southern Nevada Occupation Archaeologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt
12 / 31 / 2014
Transaction ID : 4243110
Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... **195.00**
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 955 OF 2648
	<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)
EMILY's List

A. Ms. Lois Ann Ledbetter
Full Name (Last, First, Middle Initial)
Mailing Address 139 Pelican Pt.
City Eclectic State AL Zip Code 36024
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4229698
Amount of Each Receipt this Period
50.00

B. Ms. Lois Ann Ledbetter
Full Name (Last, First, Middle Initial)
Mailing Address 139 Pelican Pt.
City Eclectic State AL Zip Code 36024
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240824
Amount of Each Receipt this Period
50.00

C. Ms. Rita Leddy Brunjes
Full Name (Last, First, Middle Initial)
Mailing Address 10504 N.W. 10th Ct.
City Plantation State FL Zip Code 33322
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 595.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 10 / 2014
Transaction ID : 4234580
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 956 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Rita Leddy Brunjes
 Full Name (Last, First, Middle Initial)
 Mailing Address 10504 N.W. 10th Ct.
 City Plantation State FL Zip Code 33322
 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 ▼
 595.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238702
 Amount of Each Receipt this Period
 30.00

B. Lisa Lederer
 Full Name (Last, First, Middle Initial)
 Mailing Address 4601 N. Park Avenue
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pr Solutions, Inc P.R.
 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
 12 / 03 / 2014
Transaction ID : 4231449
 Amount of Each Receipt this Period
 250.00

C. Ms. Karen R. Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 Miller Drive
 City Bridgewater State VA Zip Code 22812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234165
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00
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 957 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jessica Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 3443 Midnight Moon St
 City Las Vegas State NV Zip Code 89135
 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 ▼ 246.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228324
 Amount of Each Receipt this Period
 15.00

B. Ms. Jessica Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 3443 Midnight Moon St
 City Las Vegas State NV Zip Code 89135
 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 ▼ 246.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241168
 Amount of Each Receipt this Period
 15.00

C. Ms. Carolyn Virginia Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 3538 Castleridge Dr.
 City Tucker State GA Zip Code 30084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Usphs Occupation Medical Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238703
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 958 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Lyle Lehman
Full Name (Last, First, Middle Initial)
Mailing Address 44 Westview Cres
City Geneseo State NY Zip Code 14454
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 ▼ 375.00

Date of Receipt 12 / 17 / 2014
Transaction ID : 4237995
Amount of Each Receipt this Period 50.00

B. Mr. David Lehmann
Full Name (Last, First, Middle Initial)
Mailing Address 716 Gilbert Ave.
City Menlo Park State CA Zip Code 94025
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Graphic Artist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 238.00

Date of Receipt 12 / 19 / 2014
Transaction ID : 4238705
Amount of Each Receipt this Period 12.00

C. Ms. Alexandra Leichter
Full Name (Last, First, Middle Initial)
Mailing Address 8665 Wilshire Blvd., Penthouse
City Beverly Hills State CA Zip Code 90211
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 09 / 2014
Transaction ID : 4233848
Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 212.00
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 959 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Cynthia Leigh-Nussenblatt
 Full Name (Last, First, Middle Initial)
 Mailing Address 8815 Tonkawa Trl.
 City San Antonio State TX Zip Code 78255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238707
 Amount of Each Receipt this Period
 25.00

B. Ms. Penelope Leighton
 Full Name (Last, First, Middle Initial)
 Mailing Address 44 Wentworth St
 City Charleston State SC Zip Code 29401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236862
 Amount of Each Receipt this Period
 35.00

C. Ms. Penelope Leighton
 Full Name (Last, First, Middle Initial)
 Mailing Address 44 Wentworth St
 City Charleston State SC Zip Code 29401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235777
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 960 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Linda Leise
 Full Name (Last, First, Middle Initial)
 Mailing Address 2311 140th St
 City Albion State IA Zip Code 50005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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 / 28 / 2014
Transaction ID : 4228992
 Amount of Each Receipt this Period
 25.00

B. Linda Leise
 Full Name (Last, First, Middle Initial)
 Mailing Address 2311 140th St
 City Albion State IA Zip Code 50005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 28 / 2014
Transaction ID : 4242163
 Amount of Each Receipt this Period
 25.00

C. Mr. Ronald Lemahieu
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 Sequoia Ct #2
 City Princeton State NJ Zip Code 08540
 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
 12 / 23 / 2014
Transaction ID : 4240328
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 961 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Joy F. Lemkin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234411
Mailing Address 8 Gardenia		Amount of Each Receipt this Period 500.00
City Irvine	State CA	Zip Code 92620
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Mary Aurelia Lemmon		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232831
Mailing Address 255 S. Grand Ave #1004		Amount of Each Receipt this Period 30.00
City Los Angeles	State CA	Zip Code 90012
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 ▼ 325.00	

Full Name (Last, First, Middle Initial) C. Ernest Lendman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 18 / 2014 Transaction ID : 4238078
Mailing Address 3475 S. Ocean Blvd. # 409		Amount of Each Receipt this Period 500.00
City Palm Beach	State FL	Zip Code 33480
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 ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 962 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Joan Lenes
 Full Name (Last, First, Middle Initial)
 Mailing Address 197 Governors Lane
 City Shelburne State VT Zip Code 05482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237738
 Amount of Each Receipt this Period
 30.00

B. Janet Leniham
 Full Name (Last, First, Middle Initial)
 Mailing Address 2951 Derby St.
 City Berkeley State CA Zip Code 94705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4228996
 Amount of Each Receipt this Period
 10.00

C. Janet Leniham
 Full Name (Last, First, Middle Initial)
 Mailing Address 2951 Derby St.
 City Berkeley State CA Zip Code 94705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242165
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 963 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Janet Leniham		Date of Receipt 12 / 09 / 2014 Transaction ID : 4234135
Mailing Address 2951 Derby St.		Amount of Each Receipt this Period 20.00
City Berkeley	State CA	Zip Code 94705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) B. Ms. Carolyn Leonard		Date of Receipt 12 / 16 / 2014 Transaction ID : 4237052
Mailing Address 7418 Spring Village Dr. Apt. 520		Amount of Each Receipt this Period 10.00
City Springfield	State VA	Zip Code 22150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Linda Leonard		Date of Receipt 12 / 11 / 2014 Transaction ID : 4235023
Mailing Address 9056 Admirals Bay Drive		Amount of Each Receipt this Period 35.00
City Indianapolis	State IN	Zip Code 46236
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 964 OF 2648
	<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)
EMILY's List

A. Ms. Amy Lepon
Full Name (Last, First, Middle Initial)
Mailing Address 698 Jaquelyn St.
City Ashland State OR Zip Code 97520
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt
12 / 13 / 2014
Transaction ID : 4236297
Amount of Each Receipt this Period
200.00

B. Ms. Ann M. Lesch
Full Name (Last, First, Middle Initial)
Mailing Address 1326 Spruce St., Apt. 1303
City Philadelphia State PA Zip Code 19107
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 ▼ 1500.00

Date of Receipt
12 / 22 / 2014
Transaction ID : 4238261
Amount of Each Receipt this Period
500.00

C. Walter Leser
Full Name (Last, First, Middle Initial)
Mailing Address 12355 Jollette Ave
City Granada Hills State CA Zip Code 91344
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 ▼ 595.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238711
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 545.00
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 965 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Lesser		Date of Receipt
Mailing Address 18-S Ridge Rd		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Greenbelt	MD	20770
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4232896
Name of Employer	Occupation	Amount of Each Receipt this Period
Md State Educ. Assoc.	Uniserv Director	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) B. Deborah Lesslie		Date of Receipt
Mailing Address 88 Greenway Blvd.		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Churchville	NY	14428
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4228349
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="360.00"/>	

Full Name (Last, First, Middle Initial) C. Deborah Lesslie		Date of Receipt
Mailing Address 88 Greenway Blvd.		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Churchville	NY	14428
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4241038
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="360.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 966 OF 2648
	<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)
EMILY's List

A. Deena Lettas
Full Name (Last, First, Middle Initial)
Mailing Address 2818 200 Street
City Bayside State NY Zip Code 11360
FEC ID number of contributing federal political committee. **C**
Name of Employer Hunter College Occupation Student
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239968
Amount of Each Receipt this Period
300.00

B. Ms. Sue E. Leurgans
Full Name (Last, First, Middle Initial)
Mailing Address 305 N. Harvey Ave.
City Oak Park State IL Zip Code 60302
FEC ID number of contributing federal political committee. **C**
Name of Employer Rush Univeristy Medical Center Occupation Statistician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230585
Amount of Each Receipt this Period
200.00

C. Mr. Richard M. Levenson
Full Name (Last, First, Middle Initial)
Mailing Address 640 Buchanan Street
City Davis State CA Zip Code 95616
FEC ID number of contributing federal political committee. **C**
Name of Employer Uc Davis Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240911
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 480.00
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 967 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Laurie Leventhal-Belfer
 Full Name (Last, First, Middle Initial)
 Mailing Address 4275 Los Palos Avenue
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236940
 Amount of Each Receipt this Period
 15.00

B. Shaun Levi
 Full Name (Last, First, Middle Initial)
 Mailing Address 171 Dogwood Dr
 City Hershey State PA Zip Code 17033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235483
 Amount of Each Receipt this Period
 35.00

C. Ms. Suzanne Levin
 Full Name (Last, First, Middle Initial)
 Mailing Address 53 Gordon Way
 City Princeton State NJ Zip Code 08540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229658
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 968 OF 2648
	<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)
EMILY's List

A. Ms. Suzanne Levin
Full Name (Last, First, Middle Initial)
Mailing Address 53 Gordon Way
City Princeton State NJ Zip Code 08540
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 385.00

Date of Receipt
12 / 29 / 2014
Transaction ID : 4242867
Amount of Each Receipt this Period
50.00

B. Ms. Marcia W. Levine
Full Name (Last, First, Middle Initial)
Mailing Address 2678 Rochester Road
City Shaker Heights State OH Zip Code 44122
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 ▼ 2000.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236406
Amount of Each Receipt this Period
1000.00

C. Mr. Steve Leviness
Full Name (Last, First, Middle Initial)
Mailing Address 4135 N Pine Brook Way
City Houston State TX Zip Code 77059
FEC ID number of contributing federal political committee. **C**
Name of Employer Syntroleum Corporation Occupation Technical Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230587
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
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 969 OF 2648
	<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)
EMILY's List

A. Ms. Donna B. Levison
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 Glenview Dr
 City West Orange State NJ Zip Code 07052
 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 ▼ 350.00

Date of Receipt
 12 / 01 / 2014
Transaction ID : 4230588
 Amount of Each Receipt this Period
 100.00

B. Mr. Michael Levy
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 N Dearborn St 602
 City Chicago State IL Zip Code 60610
 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 ▼ 300.00

Date of Receipt
 12 / 12 / 2014
Transaction ID : 4236033
 Amount of Each Receipt this Period
 25.00

C. Ms. Seena Levy
 Full Name (Last, First, Middle Initial)
 Mailing Address 3301 36th St., N.W.
 City Washington State DC Zip Code 20016
 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 ▼ 1510.00

Date of Receipt
 12 / 18 / 2014
Transaction ID : 4238230
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 970 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Alan Levy

Mailing Address 5435 154th Ave. SE

City State Zip Code
Bellevue WA 98006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

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
 12 / 02 / 2014
Transaction ID : 4231104

Amount of Each Receipt this Period
125.00

Full Name (Last, First, Middle Initial)
B. Mr. Herman Levy

Mailing Address 7322 Rockford Drive

City State Zip Code
Falls Church VA 22043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Legal Editor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
358.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230102

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Mr. Herman Levy

Mailing Address 7322 Rockford Drive

City State Zip Code
Falls Church VA 22043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Legal Editor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
358.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240728

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.00

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 971 OF 2648
	<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)
EMILY's List

A. Edison Lewis
Full Name (Last, First, Middle Initial)

Mailing Address 7 Pine Court

City Kentfield State CA Zip Code 94904

FEC ID number of contributing federal political committee. **C**

Name of Employer Keegan & Coppin Co. Occupation Property Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : 4230591

Amount of Each Receipt this Period
 100.00

B. Ms. Sherry R. Lewis
Full Name (Last, First, Middle Initial)

Mailing Address 1020 Manzano Court NW

City Albuquerque State NM Zip Code 87102

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4227554

Amount of Each Receipt this Period
 50.00

C. David Lewis
Full Name (Last, First, Middle Initial)

Mailing Address 4931 Bonita Bay Blvd, #403

City Bonita Springs State FL Zip Code 34134

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 ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237794

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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 972 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Priscilla M. Lewis		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 16406 Daza Dr.		Transaction ID : 4236626
City Ramona	State CA	Zip Code 92065
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) B. Aya Ley		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2014
Mailing Address 824 3rd St NE		Transaction ID : 4232727
City Rio Rancho	State NM	Zip Code 87124
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer None	Occupation Home Maker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. Ms. Ruth A. Lezotte		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014
Mailing Address 460 N Nanagosa Trl		Transaction ID : 4229001
City Suttons Bay	State MI	Zip Code 49682
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00	
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 ▼ 495.00	

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 973 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ruth A. Lezotte		Date of Receipt M M / D D / Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241729
Mailing Address 460 N Nanagosa Trl		Amount of Each Receipt this Period 40.00
City Suttons Bay	State MI	Zip Code 49682
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 ▼ 495.00	

Full Name (Last, First, Middle Initial) B. Ms. Andrea Lichter		Date of Receipt M M / D D / Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4229706
Mailing Address 212 Middlefield Rd.		Amount of Each Receipt this Period 50.00
City Palo Alto	State CA	Zip Code 94301
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 ▼ 375.00	

Full Name (Last, First, Middle Initial) C. Marge Liebler		Date of Receipt M M / D D / Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241800
Mailing Address 3153 S Vrain St		Amount of Each Receipt this Period 50.00
City Denver	State CO	Zip Code 80236
FEC ID number of contributing federal political committee. C		
Name of Employer Seakr Engineering	Occupation Software Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 974 OF 2648
	<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)
EMILY's List

A. Laura Liles
Full Name (Last, First, Middle Initial)

Mailing Address 62 La Paloma Drive

City Los Alamos State NM Zip Code 87544

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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014

Transaction ID : 4228000

Amount of Each Receipt this Period
 50.00

B. Laura Liles
Full Name (Last, First, Middle Initial)

Mailing Address 62 La Paloma Drive

City Los Alamos State NM Zip Code 87544

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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014

Transaction ID : 4240831

Amount of Each Receipt this Period
 50.00

C. Bethany Lilly
Full Name (Last, First, Middle Initial)

Mailing Address 1021 N. Garfield Street #242

City Arlington State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C**

Name of Employer Bazelon Center For Mental Health Law Occupation Policy Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : 4238719

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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 975 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margareta Limburg
 Full Name (Last, First, Middle Initial)
 Mailing Address 229 Bedford Banksville Rd.
 City Bedford State NY Zip Code 10506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239679
 Amount of Each Receipt this Period
 100.00

B. John Lind
 Full Name (Last, First, Middle Initial)
 Mailing Address 4407 20th St
 City San Francisco State CA Zip Code 94114
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230595
 Amount of Each Receipt this Period
 50.00

C. Ms. Barbara L. Lindheim
 Full Name (Last, First, Middle Initial)
 Mailing Address 142 W End Ave Apt 27p
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Biotech Public Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4242946
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 976 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Patricia Lindholm		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243479
Mailing Address 2316 Lakeview Dr		Amount of Each Receipt this Period 100.00
City Fergus Falls	State MN	Zip Code 56537
FEC ID number of contributing federal political committee. C		
Name of Employer Lake Region Medical Group	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

Full Name (Last, First, Middle Initial) B. Ms. Kathryn D. Lindquist		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229003
Mailing Address 3824 Park Lake Drive		Amount of Each Receipt this Period 20.00
City Rockville	State MD	Zip Code 20853
FEC ID number of contributing federal political committee. C		
Name of Employer Intercommerce Corp	Occupation Intercommerce Corp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) C. Ms. Kathryn D. Lindquist		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241343
Mailing Address 3824 Park Lake Drive		Amount of Each Receipt this Period 20.00
City Rockville	State MD	Zip Code 20853
FEC ID number of contributing federal political committee. C		
Name of Employer Intercommerce Corp	Occupation Intercommerce Corp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 977 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. James E. Lindsay		Date of Receipt
Mailing Address 690 Fenelon Place		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Dubuque	IA	52001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4233774
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="750.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. Robert Lindstrom		Date of Receipt
Mailing Address 418 Chestnut St		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Fremont	OH	43420
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4229004
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="230.00"/>	

Full Name (Last, First, Middle Initial) C. Mr. Robert Lindstrom		Date of Receipt
Mailing Address 418 Chestnut St		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Fremont	OH	43420
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4241506
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="230.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="270.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 978 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Robert Lindstrom

Mailing Address 418 Chestnut St

City State Zip Code
Fremont OH 43420

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 ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239099

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Mr. Robert Lindstrom

Mailing Address 418 Chestnut St

City State Zip Code
Fremont OH 43420

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 ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239100

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Ms. Mary D. Lindstrom

Mailing Address 19398 12th St NE

City State Zip Code
New London MN 56273

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Requested

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 / 25 / 2014
Transaction ID : 4230103

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00

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 979 OF 2648
(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)
EMILY's List

A. Ms. Mary D. Lindstrom
Full Name (Last, First, Middle Initial)
Mailing Address 19398 12th St NE
City New London State MN Zip Code 56273
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239971
Amount of Each Receipt this Period 25.00

B. Leanna Linsky
Full Name (Last, First, Middle Initial)
Mailing Address 4450 Saint Clair Avenue
City Studio City State CA Zip Code 91604
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Screenwriter
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232664
Amount of Each Receipt this Period 50.00

C. Dr. Judith Little
Full Name (Last, First, Middle Initial)
Mailing Address 123 Barley Road
City Arcata State CA Zip Code 95521
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232626
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 980 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Tom C. Little

Mailing Address 1278 N. Blackstone Dr.

City State Zip Code
Chandler AZ 85224

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232361

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
B. Katherine Littlewood

Mailing Address Via Gabriotti 16b

City State Zip Code
Umbertide, PG UN 06019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240829

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Ms. Ann Parker Littlewood

Mailing Address 2915 NE 21st Avenue

City State Zip Code
Portland OR 97212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241730

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 981 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lois Gehr Livezey		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2014 Transaction ID : 4238293
Mailing Address 5550 S Shore Dr Apt 1314		Amount of Each Receipt this Period 250.00
City Chicago	State IL	Zip Code 60637
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Philip Livingston		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229006
Mailing Address 23223 Rainbow Arch Dr		Amount of Each Receipt this Period 5.00
City Clarksburg	State MD	Zip Code 20871
FEC ID number of contributing federal political committee. C		
Name of Employer Hgw And Associates, Llc	Occupation Software Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Philip Livingston		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241798
Mailing Address 23223 Rainbow Arch Dr		Amount of Each Receipt this Period 5.00
City Clarksburg	State MD	Zip Code 20871
FEC ID number of contributing federal political committee. C		
Name of Employer Hgw And Associates, Llc	Occupation Software Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	260.00
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 982 OF 2648
	<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)
EMILY's List

A. Philip Livingston
Full Name (Last, First, Middle Initial)

Mailing Address 23223 Rainbow Arch Dr

City Clarksburg State MD Zip Code 20871

FEC ID number of contributing federal political committee. **C**

Name of Employer Hgw And Associates, Llc Occupation Software Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4239973

Amount of Each Receipt this Period
 10.00

B. Mr. Daniel Livingston
Full Name (Last, First, Middle Initial)

Mailing Address 429 Marswen Ct.

City Simpsonville State SC Zip Code 29680

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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4230134

Amount of Each Receipt this Period
 25.00

C. Mr. Daniel Livingston
Full Name (Last, First, Middle Initial)

Mailing Address 429 Marswen Ct.

City Simpsonville State SC Zip Code 29680

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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014

Transaction ID : 4240778

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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 983 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Charles Llewellyn

Mailing Address 114 Marsh St.

City State Zip Code
Beaufort NC 28516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Health Consultant

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
 12 / 11 / 2014
Transaction ID : 4234698

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Sandra Locke

Mailing Address 2121 Cumberland St.

City State Zip Code
Rockford IL 61103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None (Retired) Social Worker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232095

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Ms. Susan J Lockhart

Mailing Address 5 Foster Place

City State Zip Code
Cambridge MA 02138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Employed Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238721

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00

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 984 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Cassandra Loerke
 Full Name (Last, First, Middle Initial)
 Mailing Address 781 D Avenue
 City Lake Oswego State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228401
 Amount of Each Receipt this Period
 50.00

B. Cassandra Loerke
 Full Name (Last, First, Middle Initial)
 Mailing Address 781 D Avenue
 City Lake Oswego State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243264
 Amount of Each Receipt this Period
 75.00

C. Cassandra Loerke
 Full Name (Last, First, Middle Initial)
 Mailing Address 781 D Avenue
 City Lake Oswego State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227510
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 985 OF 2648
	<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)
EMILY's List

A. Helen Loeser
Full Name (Last, First, Middle Initial)

Mailing Address 4181 26th St

City San Francisco State CA Zip Code 94131

FEC ID number of contributing federal political committee. **C**

Name of Employer Ucsf Occupation Educator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231361

Amount of Each Receipt this Period
35.00

B. Ms. Rosemary Logan
Full Name (Last, First, Middle Initial)

Mailing Address 4040 Gilford Court

City Jarrettsville State MD Zip Code 21084

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

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
 12 / 18 / 2014
Transaction ID : 4238164

Amount of Each Receipt this Period
15.00

C. Ms. Janet Lohr
Full Name (Last, First, Middle Initial)

Mailing Address 66 Granada

City San Francisco State CA Zip Code 94112

FEC ID number of contributing federal political committee. **C**

Name of Employer Ccsf Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239974

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **70.00**

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 986 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet Lohr		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238722
Mailing Address 66 Granada		Amount of Each Receipt this Period 95.00
City San Francisco	State CA	Zip Code 94112
FEC ID number of contributing federal political committee. C		
Name of Employer Ccsf	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	

Full Name (Last, First, Middle Initial) B. Ms. Kathleen Nies Lohr		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4235004
Mailing Address 30086 Britt		Amount of Each Receipt this Period 35.00
City Chapel Hill	State NC	Zip Code 27517
FEC ID number of contributing federal political committee. C		
Name of Employer Rti Inter.	Occupation Health Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	

Full Name (Last, First, Middle Initial) C. Mrs. Mindy B. Loiselle		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243444
Mailing Address 2215 Grove Ave		Amount of Each Receipt this Period 35.00
City Richmond	State VA	Zip Code 23220
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 870.00	

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 987 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Lawrence Lokken
 Full Name (Last, First, Middle Initial)
 Mailing Address 512 NE 10th Ave
 City Gainesville State FL Zip Code 32601
 Date of Receipt: 12 / 19 / 2014
Transaction ID : 4238723
 Amount of Each Receipt this Period: 50.00
 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: 225.00

B. Alberta Lonergan
 Full Name (Last, First, Middle Initial)
 Mailing Address 3220 91st St Apt 610
 City East Elmhurst State NY Zip Code 11369
 Date of Receipt: 12 / 09 / 2014
Transaction ID : 4234251
 Amount of Each Receipt this Period: 15.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Requested Occupation: Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 218.00

C. Ms. Sue Long
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 Ridgely Rd.
 City Glen Burnie State MD Zip Code 21061
 Date of Receipt: 11 / 25 / 2014
Transaction ID : 4227441
 Amount of Each Receipt this Period: 50.00
 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: 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00
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 988 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Helen E. Longino

Mailing Address 1318 Noe St

City State Zip Code
San Francisco CA 94131

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Stanford University Educator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
392.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231804

Amount of Each Receipt this Period
 12.00

Full Name (Last, First, Middle Initial)
B. Ms. Judith A. Lonnquist

Mailing Address 1523 11th Ave W

City State Zip Code
Seattle WA 98119

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 ▼
1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231930

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
C. Clifford Lonokapu

Mailing Address 5343 Monroe Ave.
Apt. 518

City State Zip Code
San Diego CA 92115

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
 12 / 13 / 2014
Transaction ID : 4236299

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 137.00

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 989 OF 2648
	<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)
EMILY's List

A. Mr. Thomas Looby
Full Name (Last, First, Middle Initial)

Mailing Address 5016 S. Old Yankton Place

City State Zip Code
Sioux Falls SD 57108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2014

Transaction ID : 4231108

Amount of Each Receipt this Period
150.00

B. Mr. William Look , Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 119 Mascuppic Trail

City State Zip Code
Tyngsboro MA 01879

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

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
12 / 09 / 2014

Transaction ID : 4234181

Amount of Each Receipt this Period
25.00

C. Ms. Irma N. Loomis
Full Name (Last, First, Middle Initial)

Mailing Address 3824 Wishkah Rd

City State Zip Code
Aberdeen WA 98520

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 09 / 2014

Transaction ID : 4234032

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	185.00
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 990 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cheryl Lopanik		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014 Transaction ID : 4235789
Mailing Address 23 Cameroon Drive		Amount of Each Receipt this Period 250.00
City Beaufort	State SC	Zip Code 29907
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Karin Lorentzen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227761
Mailing Address 5902 E 3rd St		Amount of Each Receipt this Period 150.00
City Tucson	State AZ	Zip Code 85711
FEC ID number of contributing federal political committee. C		
Name of Employer University Of Arizona	Occupation Communications Professional	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Mr. Edward K. Lorraine		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230024
Mailing Address 541 Elder Court		Amount of Each Receipt this Period 10.00
City San Jose	State CA	Zip Code 95123
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional).....▶	410.00
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 991 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Edward K. Lorraine
 Full Name (Last, First, Middle Initial)
 Mailing Address 541 Elder Court
 City San Jose State CA Zip Code 95123
 Date of Receipt: 12 / 26 / 2014
 Transaction ID : 4240641
 Amount of Each Receipt this Period: 10.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: REQUESTED Occupation: REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 220.00

B. Michael Losos
 Full Name (Last, First, Middle Initial)
 Mailing Address 618 Christian Street
 City White River Junction State VT Zip Code 05001
 Date of Receipt: 11 / 28 / 2014
 Transaction ID : 4229013
 Amount of Each Receipt this Period: 25.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Dartmouth-Hitchcock Med Center Occupation: Rn
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 225.00

C. Michael Losos
 Full Name (Last, First, Middle Initial)
 Mailing Address 618 Christian Street
 City White River Junction State VT Zip Code 05001
 Date of Receipt: 12 / 28 / 2014
 Transaction ID : 4242174
 Amount of Each Receipt this Period: 25.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Dartmouth-Hitchcock Med Center Occupation: Rn
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 992 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Maurie Louis

Mailing Address 5373 Cala Woods Lane

City Bainbridge Island	State WA	Zip Code 98110
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233688

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. Sidney Love

Mailing Address 6019 Saint James Dr

City West Bloomfield	State MI	Zip Code 48322
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

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
 11 / 26 / 2014
Transaction ID : 4228002

Amount of Each Receipt this Period
 10.00

Full Name (Last, First, Middle Initial)
C. Sidney Love

Mailing Address 6019 Saint James Dr

City West Bloomfield	State MI	Zip Code 48322
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

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
 12 / 29 / 2014
Transaction ID : 4242866

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 993 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Elizabeth Love			Date of Receipt
Mailing Address 5014 Lansing Dr			<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4233677
Austin	TX	78745	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="250.00"/>
Name of Employer	Occupation		
None	Retired		
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. Ms. Susan Love			Date of Receipt
Mailing Address 6950 Gunn Dr			<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4235466
Oakland	CA	94612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
None	Retired		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="323.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mrs. Nancy S. Lovejoy			Date of Receipt
Mailing Address 425 Mountain Rd PO Box 158			<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4239214
Wilbraham	MA	01095	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
None	Retired		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="375.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 995 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Carole Lovinger

Mailing Address 5300 Singing Hills Dr

City Las Vegas State NV Zip Code 89130

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 ▼ **525.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014

Transaction ID : 4239585

Amount of Each Receipt this Period
315.00

Full Name (Last, First, Middle Initial)
B. Mata Lowden-Townsend

Mailing Address 553 Freeman Ave

City Kansas City State KS Zip Code 66101

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 ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2014

Transaction ID : 4228362

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Mata Lowden-Townsend

Mailing Address 553 Freeman Ave

City Kansas City State KS Zip Code 66101

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 ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2014

Transaction ID : 4241194

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	365.00
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 996 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Charles Lowell
 Full Name (Last, First, Middle Initial)
 Mailing Address 323 Garfield Road
 City Concord State MA Zip Code 01742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 510.00

Date of Receipt
 11 / 30 / 2014
Transaction ID : 4229585
 Amount of Each Receipt this Period
 20.00

B. Mr. Charles Lowell
 Full Name (Last, First, Middle Initial)
 Mailing Address 323 Garfield Road
 City Concord State MA Zip Code 01742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 510.00

Date of Receipt
 12 / 28 / 2014
Transaction ID : 4242175
 Amount of Each Receipt this Period
 20.00

C. Ms. Janice L. Lower
 Full Name (Last, First, Middle Initial)
 Mailing Address 7512 Marbury Road
 City Bethesda State MD Zip Code 20817
 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 ▼
 500.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231557
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00
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 997 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sandra Lowery		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014
Mailing Address 6627 Sewanee Avenue		Transaction ID : 4238727
City Houston	State TX	Zip Code 77005
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer S&R Resources, Inc.	Occupation Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1285.00	

Full Name (Last, First, Middle Initial) B. Knoll Lowney		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2014
Mailing Address 1208 S Walker St		Transaction ID : 4235557
City Seattle	State WA	Zip Code 98144
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00	
Name of Employer Seld	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Knoll Lowney		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2014
Mailing Address 1208 S Walker St		Transaction ID : 4235556
City Seattle	State WA	Zip Code 98144
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer Seld	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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: (check only one)	PAGE 998 OF 2648
	<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)
EMILY's List

A. Ms. Charlotte A. Lowrey
 Full Name (Last, First, Middle Initial)
 Mailing Address 4838 Oscar Ct
 City State Zip Code
 Fremont CA 94538
 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 ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243257
 Amount of Each Receipt this Period
 100.00

B. Ms. Joyce Lowrey
 Full Name (Last, First, Middle Initial)
 Mailing Address 2231 Chester St
 City State Zip Code
 Eureka CA 95503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233284
 Amount of Each Receipt this Period
 5.00

C. Ms. Betsy Lozoff
 Full Name (Last, First, Middle Initial)
 Mailing Address 2790 Lake Bluff Ter
 City State Zip Code
 Saint Joseph MI 49085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 U Of Michigan Md
 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
 12 / 29 / 2014
Transaction ID : 4242655
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	605.00
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 999 OF 2648
	<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)
EMILY's List

A. Ms. Catharine Lucas
Full Name (Last, First, Middle Initial)
Mailing Address 1048 Sierra St
City Berkeley State CA Zip Code 94707
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 ▼ 265.00

Date of Receipt
11 / 28 / 2014
Transaction ID : 4229014
Amount of Each Receipt this Period 20.00

B. Ms. Catharine Lucas
Full Name (Last, First, Middle Initial)
Mailing Address 1048 Sierra St
City Berkeley State CA Zip Code 94707
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 ▼ 265.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4241731
Amount of Each Receipt this Period 20.00

C. Ms. Ellen K. Lucas
Full Name (Last, First, Middle Initial)
Mailing Address 871 Coachway
City Annapolis State MD Zip Code 21401
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 ▼ 500.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230600
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00
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 1000 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. M. W. Lucas		Date of Receipt
Mailing Address 2366 Caminito Afuera		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City San Diego State CA Zip Code 92107		Transaction ID : 4229015
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Sdusd Occupation Nurse		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="210.00"/>

Full Name (Last, First, Middle Initial) B. Ms. M. W. Lucas		Date of Receipt
Mailing Address 2366 Caminito Afuera		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City San Diego State CA Zip Code 92107		Transaction ID : 4241609
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Sdusd Occupation Nurse		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="210.00"/>

Full Name (Last, First, Middle Initial) C. Ms. M. W. Lucas		Date of Receipt
Mailing Address 2366 Caminito Afuera		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City San Diego State CA Zip Code 92107		Transaction ID : 4234550
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Sdusd Occupation Nurse		<input type="text" value="15.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="210.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="35.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1001 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Chris Lund
 Full Name (Last, First, Middle Initial)
 Mailing Address 637 Ozone St
 City Santa Monica State CA Zip Code 90405
 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234072
 Amount of Each Receipt this Period
 35.00

B. Ms. Bretta Lundell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2138 Rene Ct Apt2
 City Ridgewood State NY Zip Code 11385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230067
 Amount of Each Receipt this Period
 15.00

C. Ms. Bretta Lundell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2138 Rene Ct Apt2
 City Ridgewood State NY Zip Code 11385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239981
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 1002 OF 2648
	<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)
EMILY's List

A. Mr. Alston C. Lundgren , M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 La Placita Circle
 City Santa Fe State NM Zip Code 87505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229020
 Amount of Each Receipt this Period
 50.00

B. Mr. Alston C. Lundgren , M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 La Placita Circle
 City Santa Fe State NM Zip Code 87505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229615
 Amount of Each Receipt this Period
 50.00

C. Mr. Alston C. Lundgren , M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 La Placita Circle
 City Santa Fe State NM Zip Code 87505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241630
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1003 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Alston C. Lundgren , M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 La Placita Circle
 City Santa Fe State NM Zip Code 87505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243227
 Amount of Each Receipt this Period
 50.00

B. Ms. Grace I. Lusk
 Full Name (Last, First, Middle Initial)
 Mailing Address 8110 Morningside Dr
 City Granite Bay State CA Zip Code 95746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Child Psychiatrist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228006
 Amount of Each Receipt this Period
 15.00

C. Ms. Susannah Lustica
 Full Name (Last, First, Middle Initial)
 Mailing Address 2830 Warren St.
 City Eugene State OR Zip Code 97405
 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 ▼ 280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237763
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 1004 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Bergliot Lustig
Full Name (Last, First, Middle Initial)
Mailing Address 740 Renfrew Road

City El Sobrante	State CA	Zip Code 94803
---------------------	-------------	-------------------

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 ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2014

Transaction ID : 4233939

Amount of Each Receipt this Period

500.00

B. Julie Luton
Full Name (Last, First, Middle Initial)
Mailing Address 1516 Timber Edge

City McKinney	State TX	Zip Code 75070
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4239983

Amount of Each Receipt this Period

25.00

C. Gypsy Lyle
Full Name (Last, First, Middle Initial)
Mailing Address 5525 N. Grande Ave.

City Tucson	State AZ	Zip Code 85704
----------------	-------------	-------------------

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 ▼ **625.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2014

Transaction ID : 4233088

Amount of Each Receipt this Period

225.00

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 1005 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Alice Lyman

Mailing Address 850 NW Lyman Dr

City State Zip Code
Corvallis OR 97330

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 ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237731

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Jennifer Lynch

Mailing Address 80 Shepley St

City State Zip Code
Auburn ME 04210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235455

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Ms. Louise Lynch

Mailing Address 6885 Arbor Ct

City State Zip Code
Frederick MD 21703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

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
 12 / 01 / 2014
Transaction ID : 4230603

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00

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 1006 OF 2648
	<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)
EMILY's List

A. Mr. Philip T. Lynes
Full Name (Last, First, Middle Initial)
Mailing Address 586 Central Ave
City Needham Heights State MA Zip Code 02494
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236864
Amount of Each Receipt this Period
50.00

B. Susan J. Lynn
Full Name (Last, First, Middle Initial)
Mailing Address 589 County Road 23
City Bismarck State MO Zip Code 63624
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 ▼ 480.00

Date of Receipt
12 / 06 / 2014
Transaction ID : 4232559
Amount of Each Receipt this Period
40.00

C. Ms. Deborah Lyons
Full Name (Last, First, Middle Initial)
Mailing Address 410 9th Street
City Del Mar State CA Zip Code 92014
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt
12 / 12 / 2014
Transaction ID : 4235781
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00
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 1007 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Bridget G. Lyons			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4235172
Mailing Address 30 West 60th Street			Amount of Each Receipt this Period 250.00
City New York	State NY	Zip Code 10023	
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		

Full Name (Last, First, Middle Initial) B. Susan Maas			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229022
Mailing Address 1219 NW 202nd St			Amount of Each Receipt this Period 20.00
City Shoreline	State WA	Zip Code 98177	
FEC ID number of contributing federal political committee. C			
Name of Employer Argus Pacific, Inc.	Occupation Health & Safety Training Division Mgr.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) C. Susan Maas			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241327
Mailing Address 1219 NW 202nd St			Amount of Each Receipt this Period 20.00
City Shoreline	State WA	Zip Code 98177	
FEC ID number of contributing federal political committee. C			
Name of Employer Argus Pacific, Inc.	Occupation Health & Safety Training Division Mgr.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional).....▶	290.00
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 1008 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Jill Weitzen Macdonald			Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2014
Mailing Address 12883 Caminito Del Canto			Transaction ID : 4235796
City Del Mar	State CA	Zip Code 92014	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation None		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) B. Ms. Nilah M. MacDonald			Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2014
Mailing Address 25 Whortleberry Lane			Transaction ID : 4235060
City Scituate	State MA	Zip Code 02066	Amount of Each Receipt this Period 15.00
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 ▼ 490.00		

Full Name (Last, First, Middle Initial) C. Ms. Nilah M. MacDonald			Date of Receipt M M / D D / Y Y Y Y 12 / 14 / 2014
Mailing Address 25 Whortleberry Lane			Transaction ID : 4235440
City Scituate	State MA	Zip Code 02066	Amount of Each Receipt this Period 15.00
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 ▼ 490.00		

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 1009 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary MacGregor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229024
Mailing Address 1228 Franklin Ave		Amount of Each Receipt this Period 8.00
City River Forest	State IL	Zip Code 60305
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 ▼ 224.00	

Full Name (Last, First, Middle Initial) B. Mrs. Ann H. Mack		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4231113
Mailing Address 750 Weaver Dairy Rd. #243		Amount of Each Receipt this Period 50.00
City Chapel Hill	State NC	Zip Code 27514
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 ▼ 320.00	

Full Name (Last, First, Middle Initial) C. Mr. Kevin R. Mackenzie		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4231881
Mailing Address 1144 166th Ave SE		Amount of Each Receipt this Period 30.00
City Bellevue	State WA	Zip Code 98008
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

SUBTOTAL of Receipts This Page (optional).....▶	88.00
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 1010 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Barbara Maclean		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236129
Mailing Address 7116 Santa Fe Dr		Amount of Each Receipt this Period 15.00
City Overland Park	State KS	Zip Code 66204
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Carole G. Macminn		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242181
Mailing Address 1913 Gailey Ln		Amount of Each Receipt this Period 20.00
City Bloomington	State IL	Zip Code 61704
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Full Name (Last, First, Middle Initial) C. Ms. Lisa MacPherson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239589
Mailing Address 4932 Central Street		Amount of Each Receipt this Period 150.00
City Kansas City	State MO	Zip Code 64112
FEC ID number of contributing federal political committee. C		
Name of Employer Hallmark Cards Inc	Occupation Svp Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	185.00
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 1011 OF 2648
	<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)
EMILY's List

A. Ms. Geri MacQueen
Full Name (Last, First, Middle Initial)
Mailing Address 8358 Laird Cir.
City Germantown State TN Zip Code 38139
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 ▼ 948.00

Date of Receipt 12 / 05 / 2014
Transaction ID : 4232332
Amount of Each Receipt this Period 100.00

B. Ms. Geri MacQueen
Full Name (Last, First, Middle Initial)
Mailing Address 8358 Laird Cir.
City Germantown State TN Zip Code 38139
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 ▼ 948.00

Date of Receipt 12 / 12 / 2014
Transaction ID : 4235336
Amount of Each Receipt this Period 150.00

C. Judy Madden
Full Name (Last, First, Middle Initial)
Mailing Address 1319 Higgins Point
City San Antonio State TX Zip Code 78216
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4230118
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 270.00
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 1012 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Judy Madden
 Full Name (Last, First, Middle Initial)
 Mailing Address 1319 Higgins Point
 City San Antonio State TX Zip Code 78216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231843
 Amount of Each Receipt this Period
 20.00

B. Judy Madden
 Full Name (Last, First, Middle Initial)
 Mailing Address 1319 Higgins Point
 City San Antonio State TX Zip Code 78216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240748
 Amount of Each Receipt this Period
 20.00

c. Ms. Sally Madrid
 Full Name (Last, First, Middle Initial)
 Mailing Address 845 Orion Way
 City Livermore State CA Zip Code 94550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 11 / 26 / 2014
Transaction ID : 4228007
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 1013 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Craig Madsen		Date of Receipt 12 / 05 / 2014 Transaction ID : 4232376
Mailing Address 1416 Dover Road		Amount of Each Receipt this Period 50.00
City Santa Barbara	State CA	Zip Code 93103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Ms. Carol L. Maerzke		Date of Receipt 12 / 22 / 2014 Transaction ID : 4238338
Mailing Address 2543 Diamond St		Amount of Each Receipt this Period 50.00
City San Francisco	State CA	Zip Code 94131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
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 ▼ 306.00	

Full Name (Last, First, Middle Initial) C. Ms. Helga B. Magar		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233054
Mailing Address 1026 El Medio Ave		Amount of Each Receipt this Period 200.00
City Pacific Palisades	State CA	Zip Code 90272
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 1014 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jo Anne Huntley Magee		Date of Receipt
Mailing Address 751 East Rd.		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Richmond	MA	01254
FEC ID number of contributing federal political committee.		Transaction ID : 4231115
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1200.00"/>
Name of Employer	Occupation	
Self Employed	Health Care Management	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2700.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Marc Mager		Date of Receipt
Mailing Address 14401 McDonough Hts Rd		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Healdsburg	CA	95448
FEC ID number of contributing federal political committee.		Transaction ID : 4234191
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer	Occupation	
Santa Rosa Je College	Adjunct Teacher	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="385.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Deborah Mague		Date of Receipt
Mailing Address 2117 Harriet Ave.		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Minneapolis	MN	55405
FEC ID number of contributing federal political committee.		Transaction ID : 4237913
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="35.00"/>
Name of Employer	Occupation	
Allina Health Clinic	Md	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1015 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Judith A. Maguire
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 Donna Lynn Drive
 City East Greenbush State NY Zip Code 12061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 11 / 28 / 2014
Transaction ID : 4229030
 Amount of Each Receipt this Period
 20.00

B. Ms. Judith A. Maguire
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 Donna Lynn Drive
 City East Greenbush State NY Zip Code 12061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 28 / 2014
Transaction ID : 4242183
 Amount of Each Receipt this Period
 20.00

C. Ms. Judith A. Maguire
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 Donna Lynn Drive
 City East Greenbush State NY Zip Code 12061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 19 / 2014
Transaction ID : 4238735
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 1016 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Joycelyn Maguire
 Full Name (Last, First, Middle Initial)
 Mailing Address 3250 Sheffield Avenue
 City Oakland State CA Zip Code 94602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234997
 Amount of Each Receipt this Period
 15.00

B. Ms. Joycelyn Maguire
 Full Name (Last, First, Middle Initial)
 Mailing Address 3250 Sheffield Avenue
 City Oakland State CA Zip Code 94602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2014
Transaction ID : 4232405
 Amount of Each Receipt this Period
 25.00

C. Ms. Frances Magurno
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Shore Rd.
 City East Patchogue State NY Zip Code 11772
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 13 / 2014
Transaction ID : 4236130
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 1017 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Katherine Austin Mahle
 Full Name (Last, First, Middle Initial)
 Mailing Address 1410 Spring Valley Rd
 City Golden Valley State MN Zip Code 55422
 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 ▼
 1250.00

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4233719
 Amount of Each Receipt this Period
 100.00

B. Ms. Jane Mahorter
 Full Name (Last, First, Middle Initial)
 Mailing Address 559 Cutler
 City Maple Shade State NJ Zip Code 08052
 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 ▼
 300.00

Date of Receipt
 12 / 11 / 2014
Transaction ID : 4234989
 Amount of Each Receipt this Period
 25.00

C. Ms. Barbara B. Mair
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 Spring Street
 City Pleasantville State NY Zip Code 10570
 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 ▼
 260.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231629
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
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 1018 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Janet Majerus
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 1722
 City State Zip Code
 El Prado NM 87529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239985
 Amount of Each Receipt this Period
 100.00

B. Marc Major
 Full Name (Last, First, Middle Initial)
 Mailing Address 919 Levering Ave Apt 208
 City State Zip Code
 Los Angeles CA 90024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cga Cxo
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228354
 Amount of Each Receipt this Period
 20.00

C. Marc Major
 Full Name (Last, First, Middle Initial)
 Mailing Address 919 Levering Ave Apt 208
 City State Zip Code
 Los Angeles CA 90024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cga Cxo
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241187
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 1019 OF 2648
(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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Wendie D. Malick

Mailing Address PO Box 329

City State Zip Code
Topanga CA 90290

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED Actress

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
273.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233303

Amount of Each Receipt this Period
273.00

Full Name (Last, First, Middle Initial)
B. Ms. Susann Malin

Mailing Address 141 east 3rd st, 6H

City State Zip Code
New York NY 10009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Na Na

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
12 / 14 / 2014
Transaction ID : 4235560

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Ms. Susann Malin

Mailing Address 141 east 3rd st, 6H

City State Zip Code
New York NY 10009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Na Na

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
12 / 14 / 2014
Transaction ID : 4235561

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 303.00

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 1020 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Martha Mallicote		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229033
Mailing Address 10626 SW 12th Terr		Amount of Each Receipt this Period 20.00
City Micanopy State FL Zip Code 32667	FEC ID number of contributing federal political committee. C	
Name of Employer University Of Florida Occupation Veterinarian	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00

Full Name (Last, First, Middle Initial) B. Martha Mallicote		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242185
Mailing Address 10626 SW 12th Terr		Amount of Each Receipt this Period 20.00
City Micanopy State FL Zip Code 32667	FEC ID number of contributing federal political committee. C	
Name of Employer University Of Florida Occupation Veterinarian	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00

Full Name (Last, First, Middle Initial) C. Ms. Luise Malloy		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014 Transaction ID : 4236007
Mailing Address 5808 Carlyle Street		Amount of Each Receipt this Period 20.00
City Cheverly State MD Zip Code 20785	FEC ID number of contributing federal political committee. C	
Name of Employer Emerging Markets Mgmt Llc Occupation Requested	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 1021 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lisa Malone		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234182
Mailing Address 49 Willow Hill Road		Amount of Each Receipt this Period 30.00
City Saint Louis	State MO	Zip Code 63124
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Marcellene Malouf		Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2014 Transaction ID : 4234703
Mailing Address 3441 Westminster Ave		Amount of Each Receipt this Period 100.00
City Dallas	State TX	Zip Code 75205
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Ms. Nancy Jo Malpass		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232862
Mailing Address 766b Espada Drive		Amount of Each Receipt this Period 20.00
City El Paso	State TX	Zip Code 79912
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Physical Therapist - Semi Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1022 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rosemary M. Malvey		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238740
Mailing Address 633 Terrace Ave		Amount of Each Receipt this Period 250.00
City Half Moon Bay	State CA	Zip Code 94019
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) B. Dr. Anita J. Mancini		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243329
Mailing Address PO Box 30280		Amount of Each Receipt this Period 250.00
City Salt Lake City	State UT	Zip Code 84130
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 ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Joan Mancuso-Adair		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4226686
Mailing Address 1300 Skycrest Dr., Apt. 2		Amount of Each Receipt this Period 200.00
City Walnut Creek	State CA	Zip Code 94595
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	475.00
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 1023 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Mandelker		Date of Receipt
Mailing Address 1010 5th Ave., # 9-B		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4227431
New York	NY	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="100.00"/>
Name of Employer	Occupation	
Requested	Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Doyle Maness		Date of Receipt
Mailing Address 2138 Oakley Ave		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4235216
Menlo Park	CA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="50.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Linda R. Mangelsdorf		Date of Receipt
Mailing Address 68 High Point Circle		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4239210
Newburgh	NY	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="100.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="850.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1024 OF 2648
	<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)
EMILY's List

A. Dianna Mangerich
Full Name (Last, First, Middle Initial)

Mailing Address 8230 Bovington Lane

City Citrus Heights	State CA	Zip Code 95610
------------------------	-------------	-------------------

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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	17	/	2014

Transaction ID : 4237772

Amount of Each Receipt this Period
25.00

B. Ms. Miriam Mangini
Full Name (Last, First, Middle Initial)

Mailing Address 250 Hillside Ave

City Piedmont	State CA	Zip Code 94611
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer John A Mangini & Company, Llp	Occupation Cpa
---	-------------------

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
12	/	28	/	2014

Transaction ID : 4241278

Amount of Each Receipt this Period
100.00

C. Ms. Nancy M. Mann
Full Name (Last, First, Middle Initial)

Mailing Address 50 Wilshire Road

City Madison	State CT	Zip Code 06443
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

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
12	/	17	/	2014

Transaction ID : 4237745

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	155.00
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 1025 OF 2648
	<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)
EMILY's List

A. Ms. Elizabeth Manning
Full Name (Last, First, Middle Initial)
Mailing Address 7604 Nez Perce Trace
City Manor State TX Zip Code 78653
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 15 / 2014**
Transaction ID : 4236688
Amount of Each Receipt this Period **15.00**

B. Mr. Stephen Russell Manning
Full Name (Last, First, Middle Initial)
Mailing Address 12522 Choto Mill Lane
City Knoxville State TN Zip Code 37922
FEC ID number of contributing federal political committee. **C**
Name of Employer Tetra Tech Occupation Technical Writer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **600.00**

Date of Receipt **12 / 03 / 2014**
Transaction ID : 4232062
Amount of Each Receipt this Period **50.00**

C. Dr. Linda G. Manning
Full Name (Last, First, Middle Initial)
Mailing Address 3421b Richards St
City Nashville State TN Zip Code 37215
FEC ID number of contributing federal political committee. **C**
Name of Employer Vanderbilt University Occupation Psychologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **210.00**

Date of Receipt **12 / 16 / 2014**
Transaction ID : 4237315
Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... **115.00**
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 1026 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Sharon Y. Manuel
 Full Name (Last, First, Middle Initial)
 Mailing Address 15298 SE Oregon Trail Dr
 City Clackamas State OR Zip Code 97015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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 / 26 / 2014
Transaction ID : 4228009
 Amount of Each Receipt this Period
 25.00

B. Ms. Sharon Y. Manuel
 Full Name (Last, First, Middle Initial)
 Mailing Address 15298 SE Oregon Trail Dr
 City Clackamas State OR Zip Code 97015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 26 / 2014
Transaction ID : 4240770
 Amount of Each Receipt this Period
 25.00

C. Mr. Eric Manuel
 Full Name (Last, First, Middle Initial)
 Mailing Address 1127 Mapleview Ct
 City High Point State NC Zip Code 27265
 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 ▼ 620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239143
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 1027 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Ann P. Manwaring

Mailing Address PO Box 1089

City State Zip Code
Wilmington VT 05363

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243505

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Marty Marciniak

Mailing Address 2382 Idaho St.

City State Zip Code
Chesterton IN 46304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

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
 12 / 10 / 2014
Transaction ID : 4234345

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
C. Mr. Marvin Marcus

Mailing Address 104 Calibre Woods Dr.

City State Zip Code
Atlanta GA 30329

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

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
 12 / 22 / 2014
Transaction ID : 4239516

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00

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 1028 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Sherrie Marcy		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233521
Mailing Address 10433 64th Ln NE		Amount of Each Receipt this Period 5.00
City Albertville	State MN	Zip Code 55301
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 385.00
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sherrie Marcy		Date of Receipt 12 / 14 / 2014 Transaction ID : 4235467
Mailing Address 10433 64th Ln NE		Amount of Each Receipt this Period 25.00
City Albertville	State MN	Zip Code 55301
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 385.00
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Susan Marett		Date of Receipt 11 / 28 / 2014 Transaction ID : 4229036
Mailing Address 92 N Rhododendron Dr.		Amount of Each Receipt this Period 35.00
City Port Townsend	State WA	Zip Code 98368
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 335.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 1029 OF 2648
	<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)
EMILY's List

A. Mr. Larry Margo
Full Name (Last, First, Middle Initial)
Mailing Address 11731 Addison St.
City Valley Village State CA Zip Code 91607
FEC ID number of contributing federal political committee. **C**
Name of Employer Berkshire/Hathaway Occupation Real Estate
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **240.00**

Date of Receipt **12 / 30 / 2014**
Transaction ID : 4242740
Amount of Each Receipt this Period **40.00**

B. Mrs. Barbara L. Margolin
Full Name (Last, First, Middle Initial)
Mailing Address 4381 Vinton Ave
City Culver City State CA Zip Code 90232
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 **500.00**

Date of Receipt **12 / 01 / 2014**
Transaction ID : 4230606
Amount of Each Receipt this Period **100.00**

C. Ms. Elena Margolis
Full Name (Last, First, Middle Initial)
Mailing Address 11611 Chenault St., Apt. 207
City Los Angeles State CA Zip Code 90049
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 **235.00**

Date of Receipt **12 / 01 / 2014**
Transaction ID : 4230607
Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... **190.00**
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 1030 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Cynthia Marino-Clark

Mailing Address 1969 Par Dr

City State Zip Code
Naples FL 34120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Arthrex Inc Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236303

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Linda Marion

Mailing Address 556 Kingsley Ave

City State Zip Code
Palo Alto CA 94301

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 ▼
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237252

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
C. Virginia Mariposa

Mailing Address 4708 Chandler

City State Zip Code
Santa Barbara CA 93110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234622

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00

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 1031 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Markham		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4230209
Mailing Address 1402 Emerson Street NW		Amount of Each Receipt this Period 100.00
City Washington	State DC	Zip Code 20011
FEC ID number of contributing federal political committee. C		
Name of Employer Usaid	Occupation Senior Coordinator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Ms. Susan Markham		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239989
Mailing Address 1402 Emerson Street NW		Amount of Each Receipt this Period 100.00
City Washington	State DC	Zip Code 20011
FEC ID number of contributing federal political committee. C		
Name of Employer Usaid	Occupation Senior Coordinator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. Ms. Susan Markham		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4244925
Mailing Address 1402 Emerson Street NW		Amount of Each Receipt this Period 100.00
City Washington	State DC	Zip Code 20011
FEC ID number of contributing federal political committee. C		
Name of Employer Usaid	Occupation Senior Coordinator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 1032 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Estelle Markowitz

Mailing Address 1887 Greenfield Avenue Apt. 31

City Los Angeles	State CA	Zip Code 90025
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

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
12	/	23	/	2014

Transaction ID : 4239991

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Ms. Jeanne Marks

Mailing Address PO Box 92

City Killawog	State NY	Zip Code 13794
------------------	-------------	-------------------

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230608

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
C. Mr. John S. Marlow

Mailing Address P.O. Box 1089

City Martinsburg	State WV	Zip Code 25402
---------------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230609

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 1033 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margo Marquess
 Full Name (Last, First, Middle Initial)
 Mailing Address 5322 Fox Den Rd
 City State Zip Code
 Roanoke VA 24018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Housewife
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232843
 Amount of Each Receipt this Period
 100.00

B. Ms. Elizabeth Marsala
 Full Name (Last, First, Middle Initial)
 Mailing Address 1015 Drewry St NE
 City State Zip Code
 Atlanta GA 30306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Requested Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230610
 Amount of Each Receipt this Period
 200.00

C. Ms. Josephine R. Marsh
 Full Name (Last, First, Middle Initial)
 Mailing Address 13214 NE 89 St
 City State Zip Code
 Redmond WA 98052
 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 ▼
 346.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231365
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
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 1034 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Josephine R. Marsh		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014
Mailing Address 13214 NE 89 St		Transaction ID : 4237308
City Redmond	State WA	Zip Code 98052
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.00	

Full Name (Last, First, Middle Initial) B. Patricia Marsh		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 8501 W. Whitehorn Way		Transaction ID : 4229039
City Peoria	State AZ	Zip Code 85383
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	

Full Name (Last, First, Middle Initial) C. Patricia Marsh		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
Mailing Address 8501 W. Whitehorn Way		Transaction ID : 4241513
City Peoria	State AZ	Zip Code 85383
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 1035 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Howard Z. Marshall
 Full Name (Last, First, Middle Initial)
 Mailing Address 94 Greenlawn Ave
 City State Zip Code
 Newton Center MA 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 computer programmer self
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237704
 Amount of Each Receipt this Period
 15.00

B. Mrs. Kaydie L. Marshall
 Full Name (Last, First, Middle Initial)
 Mailing Address 8409 N. 17th Street
 City State Zip Code
 Phoenix AZ 85020
 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 ▼
 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229594
 Amount of Each Receipt this Period
 20.00

C. Mrs. Kaydie L. Marshall
 Full Name (Last, First, Middle Initial)
 Mailing Address 8409 N. 17th Street
 City State Zip Code
 Phoenix AZ 85020
 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 ▼
 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241515
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 1036 OF 2648
	<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)
EMILY's List

A. Ms. Alicia Marshall
Full Name (Last, First, Middle Initial)
Mailing Address 1456 23rd St.
City Manhattan Beach State CA Zip Code 90266
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
None Retired
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014
Transaction ID : 4238744
Amount of Each Receipt this Period
200.00

B. Ms. Phyllis Martens
Full Name (Last, First, Middle Initial)
Mailing Address 9105 Arrowhead DR E
City Scotts State MI Zip Code 49088
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
None Retired
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
575.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014
Transaction ID : 4230611
Amount of Each Receipt this Period
225.00

C. Jack Martin
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 5543
City Austin State TX Zip Code 78763
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Hill+Knowlton Strategies Ceo
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1100.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4230190
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	345.00
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 1037 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jack Martin		Date of Receipt 12 / 26 / 2014 Transaction ID : 4240862
Mailing Address PO Box 5543		Amount of Each Receipt this Period 100.00
City Austin	State TX	Zip Code 78763
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Hill+Knowlton Strategies	Occupation Ceo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) B. Ms. Jane V. Martin		Date of Receipt 12 / 11 / 2014 Transaction ID : 4235002
Mailing Address 13713 - 16th Ave SW		Amount of Each Receipt this Period 20.00
City Burien	State WA	Zip Code 98166
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Ms. Patricia Yancey Martin		Date of Receipt 12 / 28 / 2014 Transaction ID : 4241517
Mailing Address 3119 Brockton Way		Amount of Each Receipt this Period 250.00
City Tallahassee	State FL	Zip Code 32308
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	370.00
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 1038 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Arlene Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 W 12TH St., Apt. 2F
 City New York State NY Zip Code 10011
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242765
 Amount of Each Receipt this Period
 100.00

B. Ms. Julia Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 144 Toyon DRive
 City Fairfax State CA Zip Code 94930
 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 ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4238029
 Amount of Each Receipt this Period
 250.00

C. Mr. Ray Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 454 N. 27th St., Apt. 4
 City Fort Dodge State IA Zip Code 50501
 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 ▼ 954.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230614
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional).....▶	410.00
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 1039 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Frederick Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 Holmes Ranch RD
 PO Box 328
 City Philo State CA Zip Code 95466
 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 **1775.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243091
 Amount of Each Receipt this Period
 100.00

B. Ms. Arnetta J. Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4500 Behlmann Farms Blvd
 City Florissant State MO Zip Code 63034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231788
 Amount of Each Receipt this Period
 20.00

C. Ms. Karen Martinac
 Full Name (Last, First, Middle Initial)
 Mailing Address 4915 North Orchard Street
 City Tacoma State WA Zip Code 98407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228014
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....	155.00
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 1040 OF 2648
	<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)
EMILY's List

A. Mr. Linden Martineau
Full Name (Last, First, Middle Initial)
Mailing Address 5000 Boardwalk Apt 1118
City Ventnor City State NJ Zip Code 08406
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 ▼ 491.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4227560
Amount of Each Receipt this Period 53.00

B. Pepper Marts
Full Name (Last, First, Middle Initial)
Mailing Address 2911 Maximillian Rd NW
City Albuquerque State NM Zip Code 87104
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4230127
Amount of Each Receipt this Period 20.00

C. Pepper Marts
Full Name (Last, First, Middle Initial)
Mailing Address 2911 Maximillian Rd NW
City Albuquerque State NM Zip Code 87104
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt 12 / 23 / 2014
Transaction ID : 4239993
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 93.00
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 1041 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Eileen Marx		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 18 / 2014 Transaction ID : 4238005
Mailing Address 29 Washington Sq W Apt 16c		Amount of Each Receipt this Period 500.00
City New York	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. John L. Mason		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234155
Mailing Address 5985 Exeter Cir		Amount of Each Receipt this Period 100.00
City Norcross	State GA	Zip Code 30071
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 ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. Ms. Sally D. Mason		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4235097
Mailing Address 806 Settlement Drive		Amount of Each Receipt this Period 25.00
City Williamsburg	State VA	Zip Code 23188
FEC ID number of contributing federal political committee. C		
Name of Employer Omohundro Institute/Colonial Williamsb	Occupation Editor/Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional).....▶	625.00
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 1042 OF 2648
	<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)
EMILY's List

A. Mr. Patricia Massey
Full Name (Last, First, Middle Initial)
Mailing Address 1707 Schieffer Ave
City Austin State TX Zip Code 78722
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 ▼ 300.00

Date of Receipt 11 / 26 / 2014
Transaction ID : 4228016
Amount of Each Receipt this Period 25.00

B. Mr. Patricia Massey
Full Name (Last, First, Middle Initial)
Mailing Address 1707 Schieffer Ave
City Austin State TX Zip Code 78722
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 ▼ 300.00

Date of Receipt 12 / 26 / 2014
Transaction ID : 4240787
Amount of Each Receipt this Period 25.00

C. Ms. Margaret E. Massey-Cox
Full Name (Last, First, Middle Initial)
Mailing Address 8036 Camberley Dr.
City Powell State TN Zip Code 37849
FEC ID number of contributing federal political committee. **C**
Name of Employer Margaret Massey-Cox & Associates, Llc Occupation Business Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 02 / 2014
Transaction ID : 4231367
Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 1043 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margaret E. Massey-Cox
 Full Name (Last, First, Middle Initial)
 Mailing Address 8036 Camberley Dr.
 City Powell State TN Zip Code 37849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Margaret Massey-Cox & Associates, Llc Occupation Business Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4234640
 Amount of Each Receipt this Period 75.00

B. Ms. Shirley Massie
 Full Name (Last, First, Middle Initial)
 Mailing Address 5402 Via Carrizo
 City Laguna Woods State CA Zip Code 92637
 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 ▼ 448.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4234804
 Amount of Each Receipt this Period 50.00

C. Ms. Sandra Mast
 Full Name (Last, First, Middle Initial)
 Mailing Address 19231 Sherman Way, unit36
 City Reseda State CA Zip Code 91335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lausd Occupation Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 620.00

Date of Receipt 11 / 28 / 2014
Transaction ID : 4229046
 Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
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 1045 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. James Mathews		Date of Receipt
Mailing Address 2001 Alameda #169		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4239231
San Mateo	CA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="35.00"/>
Name of Employer	Occupation	
Baywood School	Teacher	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="420.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Carol J. Mathews		Date of Receipt
Mailing Address 911 Ternie Lane		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4229583
Crescent City	CA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="20.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="270.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Carol J. Mathews		Date of Receipt
Mailing Address 911 Ternie Lane		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4241519
Crescent City	CA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="20.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="270.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1046 OF 2648
	(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)
EMILY's List

A. Gil Mathys
Full Name (Last, First, Middle Initial)

Mailing Address 161 Austin Dr.

City Burlington State VT Zip Code 05401

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014

Transaction ID : 4234631

Amount of Each Receipt this Period
50.00

B. Ms. Mae Matousek
Full Name (Last, First, Middle Initial)

Mailing Address 14815 Jewel St.

City Brookfield State WI Zip Code 53005

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4229048

Amount of Each Receipt this Period
20.00

C. Ms. Mae Matousek
Full Name (Last, First, Middle Initial)

Mailing Address 14815 Jewel St.

City Brookfield State WI Zip Code 53005

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4242193

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 1047 OF 2648
(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)
EMILY's List

A. Ms. Karen L. Matteson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2115 3rd St., Unit 202
 City Santa Monica State CA Zip Code 90405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Us Sec Attorney
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232294
 Amount of Each Receipt this Period
 100.00

B. Ms. Marcia Matthaei
 Full Name (Last, First, Middle Initial)
 Mailing Address 1473 Evergreen Place
 City Fircrest State WA Zip Code 98466
 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 ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237780
 Amount of Each Receipt this Period
 20.00

C. Ms. Barbara Matthews
 Full Name (Last, First, Middle Initial)
 Mailing Address 23810 111th PI W
 City Woodway State WA Zip Code 98020
 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 ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229049
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
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 1048 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Barbara Matthews
Full Name (Last, First, Middle Initial)
Mailing Address 23810 111th PI W
City Woodway State WA Zip Code 98020
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 420.00

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240806
Amount of Each Receipt this Period
35.00

B. Ms. Gail Mattson
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 55
City Upton State NY Zip Code 11973
FEC ID number of contributing federal political committee. **C**
Name of Employer Navarro Research and Engineering Occupation Vice President Engin
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233686
Amount of Each Receipt this Period
20.00

C. Ms. Gail Mattson
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 55
City Upton State NY Zip Code 11973
FEC ID number of contributing federal political committee. **C**
Name of Employer Navarro Research and Engineering Occupation Vice President Engin
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233687
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 1049 OF 2648
	<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)
EMILY's List

A. Addie Mattson
Full Name (Last, First, Middle Initial)
Mailing Address 5240 W 92nd St
City Bloomington State MN Zip Code 55437
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Voluntee
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt
12 / 12 / 2014
Transaction ID : 4235902
Amount of Each Receipt this Period
200.00

B. Ms. Rosalie Matzkin
Full Name (Last, First, Middle Initial)
Mailing Address 1901 Walnut Street Apt. 3d
City Philadelphia State PA Zip Code 19103
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233079
Amount of Each Receipt this Period
100.00

C. Ms. Frances Maurer
Full Name (Last, First, Middle Initial)
Mailing Address 464 Yorkshire DR
City Severna Park State MD Zip Code 21146
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Community Health Consult.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
12 / 11 / 2014
Transaction ID : 4234820
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
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 1050 OF 2648
	<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)
EMILY's List

A. Eddy L. Maurice
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 Kernochan Ave
 City Hempstead State NY Zip Code 11550
 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 ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230078
 Amount of Each Receipt this Period
 15.00

B. Ms. Tracy Maxwell
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 2444
 City Hobe Sound State FL Zip Code 33475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Delta Airlines Occupation Flight Attendant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238747
 Amount of Each Receipt this Period
 35.00

C. Ms. Kathryn M. May
 Full Name (Last, First, Middle Initial)
 Mailing Address 8369 N. Gills Pier Road
 City Northport State MI Zip Code 49670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4244818
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 1051 OF 2648
	<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)
EMILY's List

A. Ms. Gloria May
Full Name (Last, First, Middle Initial)
Mailing Address 1219 Oakdyke Ave
City La Habra Heights State CA Zip Code 90631
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2014
Transaction ID : 4237099
Amount of Each Receipt this Period
15.00

B. Ms. Dale Mayer
Full Name (Last, First, Middle Initial)
Mailing Address 744 Squam Lake Rd
City Center Sandwich State NH Zip Code 03227
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4229053
Amount of Each Receipt this Period
20.00

C. Ms. Dale Mayer
Full Name (Last, First, Middle Initial)
Mailing Address 744 Squam Lake Rd
City Center Sandwich State NH Zip Code 03227
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4242197
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 1052 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jeanne S. Mayer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3901 Cathedral Ave., NW
 City Washington State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 516.00

Date of Receipt
 12 / 11 / 2014
Transaction ID : 4234990
 Amount of Each Receipt this Period
 15.00

B. Ms. Jeanne S. Mayer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3901 Cathedral Ave., NW
 City Washington State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 516.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231553
 Amount of Each Receipt this Period
 55.00

C. Ms. Lynn Mayer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1320 NE 19th Ave
 City Portland State OR Zip Code 97232
 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 ▼ 570.00

Date of Receipt
 12 / 01 / 2014
Transaction ID : 4230618
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	170.00
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 1053 OF 2648
	<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)
EMILY's List

A. Mr. Raymond Mayer
Full Name (Last, First, Middle Initial)

Mailing Address 5015 SE 30th Ave., Apt. 4

City Portland State OR Zip Code 97202

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 ▼ **850.00**

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232330

Amount of Each Receipt this Period
200.00

B. Harry Mayer
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2197

City Temecula State CA Zip Code 92593

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239688

Amount of Each Receipt this Period
50.00

C. Mr. John Mayher
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 155

City Mountainhome State PA Zip Code 18342

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 ▼ **300.00**

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232814

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... **275.00**

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 1054 OF 2648
<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Susan Maynard		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229055
Mailing Address 3703 Tiger Lily Ct SE		Amount of Each Receipt this Period 25.00
City Southport	State NC	Zip Code 28461
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Interior Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Susan Maynard		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242198
Mailing Address 3703 Tiger Lily Ct SE		Amount of Each Receipt this Period 25.00
City Southport	State NC	Zip Code 28461
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Interior Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Faye Mayo		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4228019
Mailing Address 818 N. Doheny Dr. Apt. 204		Amount of Each Receipt this Period 10.00
City West Hollywood	State CA	Zip Code 90069
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Family Counselor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 1055 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Faye Mayo
Full Name (Last, First, Middle Initial)
Mailing Address 818 N. Doheny Dr. Apt. 204

City West Hollywood	State CA	Zip Code 90069
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Family Counselor
--------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234956

Amount of Each Receipt this Period
 10.00

B. Faye Mayo
Full Name (Last, First, Middle Initial)
Mailing Address 818 N. Doheny Dr. Apt. 204

City West Hollywood	State CA	Zip Code 90069
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Family Counselor
--------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240640

Amount of Each Receipt this Period
 10.00

C. Mr. Victor Mayper
Full Name (Last, First, Middle Initial)
Mailing Address 10061 Riverside Dr.

City Ben Lomond	State CA	Zip Code 95005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243560

Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....	55.00
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 1056 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Penelope L. Maza		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 18 / 2014
Mailing Address 10012 Menlo Avenue		Transaction ID : 4238030
City Silver Spring	State MD	Zip Code 20910
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 450.00	
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 ▼ 900.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary C. Mazure		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 875 Greenview Ct. Apt. 54		Transaction ID : 4229056
City Rochester Hills	State MI	Zip Code 48307
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00	
Name of Employer Utica Community Schools	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary C. Mazure		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
Mailing Address 875 Greenview Ct. Apt. 54		Transaction ID : 4242199
City Rochester Hills	State MI	Zip Code 48307
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00	
Name of Employer Utica Community Schools	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional).....▶	510.00
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 1057 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linnelle T. Mazzucchi		Date of Receipt
Mailing Address 930 Tyrone PL		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Roswell	GA	30075
FEC ID number of contributing federal political committee.		Transaction ID : 4231121
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
None	Retired	
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) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Linda Lopez Lopez McAlister		Date of Receipt
Mailing Address 600 Alcalde PI SW 4a		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Albuquerque	NM	87104
FEC ID number of contributing federal political committee.		Transaction ID : 4231920
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1410.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Linda Lopez Lopez McAlister		Date of Receipt
Mailing Address 600 Alcalde PI SW 4a		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Albuquerque	NM	87104
FEC ID number of contributing federal political committee.		Transaction ID : 4234523
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1410.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1058 OF 2648
	<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)
EMILY's List

A. Donna McAllister
 Full Name (Last, First, Middle Initial)
 Mailing Address 2600 S. Town Center Drive
 City Las Vegas State NV Zip Code 89135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NA Occupation NA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228335
 Amount of Each Receipt this Period
 20.00

B. Donna McAllister
 Full Name (Last, First, Middle Initial)
 Mailing Address 2600 S. Town Center Drive
 City Las Vegas State NV Zip Code 89135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NA Occupation NA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241173
 Amount of Each Receipt this Period
 20.00

C. Corinne McArdle
 Full Name (Last, First, Middle Initial)
 Mailing Address 232 N. Illinois Avenue
 City Glenwood State IL Zip Code 60425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233652
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 1059 OF 2648
	<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

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)
EMILY's List

A. Selina H. McArdle
Full Name (Last, First, Middle Initial)
Mailing Address 1141 Fox Hill Rd.
City Cheshire State CT Zip Code 06410
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 ▼ 425.00

Date of Receipt
12 / 13 / 2014
Transaction ID : 4236180
Amount of Each Receipt this Period
50.00

B. Selina H. McArdle
Full Name (Last, First, Middle Initial)
Mailing Address 1141 Fox Hill Rd.
City Cheshire State CT Zip Code 06410
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 ▼ 425.00

Date of Receipt
12 / 10 / 2014
Transaction ID : 4234330
Amount of Each Receipt this Period
100.00

C. Sara McAulay
Full Name (Last, First, Middle Initial)
Mailing Address 4217 Fruitvale Ave
City Oakland State CA Zip Code 94602
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
12 / 11 / 2014
Transaction ID : 4235124
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 1060 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Sara McAulay
 Full Name (Last, First, Middle Initial)
 Mailing Address 4217 Fruitvale Ave
 City Oakland State CA Zip Code 94602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation 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
 12 / 30 / 2014
Transaction ID : 4243014
 Amount of Each Receipt this Period
 100.00

B. Ms. Janet W. McCabe
 Full Name (Last, First, Middle Initial)
 Mailing Address 1326 K St
 City Anchorage State AK Zip Code 99501
 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 ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237401
 Amount of Each Receipt this Period
 200.00

C. Ms. Margaret McCamant
 Full Name (Last, First, Middle Initial)
 Mailing Address 1209 N. Astor Street, #4N
 City Chicago State IL Zip Code 60610
 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 ▼ 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234203
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	320.00
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 1061 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Tort McCarter
 Full Name (Last, First, Middle Initial)
 Mailing Address 164 Andrew Ave.
 City Encinitas State CA Zip Code 92024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Dietitian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239323
 Amount of Each Receipt this Period
 50.00

B. Mr. Jose C. McCarthy
 Full Name (Last, First, Middle Initial)
 Mailing Address 1960 E 17th Avenue
 City Eugene State OR Zip Code 97403
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234199
 Amount of Each Receipt this Period
 25.00

C. Ms. Mary McCarthy
 Full Name (Last, First, Middle Initial)
 Mailing Address 3865 J Street Apt 345
 City Sacramento State CA Zip Code 95816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229057
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 1062 OF 2648
	<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)
EMILY's List

A. Ms. Mary McCarthy
Full Name (Last, First, Middle Initial)
Mailing Address 3865 J Street Apt 345

City Sacramento	State CA	Zip Code 95816
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4241682

Amount of Each Receipt this Period
10.00

B. Ms. Mary McCarthy
Full Name (Last, First, Middle Initial)
Mailing Address 3865 J Street Apt 345

City Sacramento	State CA	Zip Code 95816
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 29 / 2014
Transaction ID : 4242639

Amount of Each Receipt this Period
15.00

C. Ms. Bonnie McCay Merritt
Full Name (Last, First, Middle Initial)
Mailing Address 26 Grafton Rd

City Stockton	State NJ	Zip Code 08559
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Rutgers University	Occupation Requested University Professor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233689

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 1064 OF 2648
	<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)
EMILY's List

A. Ms. Carol McCleary , Ph.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2817 Fleur Drive
 City San Marino State CA Zip Code 91108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Usc Keck School Of Medicine Neuropsychologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241382
 Amount of Each Receipt this Period
 35.00

B. Ms. Sandra L. McClurg
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 Woodkirk Lane
 City Chapel Hill State NC Zip Code 27514
 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 ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235759
 Amount of Each Receipt this Period
 20.00

c. Ms. Sandra L. McClurg
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 Woodkirk Lane
 City Chapel Hill State NC Zip Code 27514
 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 ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239277
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 1065 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Marge McClurg		Date of Receipt
Mailing Address 2607 Stratford Dr.		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City State Zip Code Austin TX 78746		Transaction ID : 4234840
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="350.00"/>
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 ▼ <input type="text" value="350.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Sylvia McCollor		Date of Receipt
Mailing Address 19 S. 1st Street, Apt. B1201		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City State Zip Code Minneapolis MN 55401		Transaction ID : 4234036
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
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 ▼ <input type="text" value="290.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Joan McConkey		Date of Receipt
Mailing Address 4860 Sioux Drive		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City State Zip Code Boulder CO 80303		Transaction ID : 4237307
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="813.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="470.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1066 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Robert McConnell		Date of Receipt 12 / 12 / 2014 Transaction ID : 4235999
Mailing Address 79380 Fred Waring Dr		Amount of Each Receipt this Period 15.00
City Bermuda Dunes	State CA	Zip Code 92203
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 440.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) B. Ms. Jennifer McCoy		Date of Receipt 12 / 31 / 2014 Transaction ID : 4243370
Mailing Address 248 Connecticut Avenue NE		Amount of Each Receipt this Period 100.00
City Atlanta	State GA	Zip Code 30307
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Georgia State University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Jennifer McCoy		Date of Receipt 12 / 31 / 2014 Transaction ID : 4243371
Mailing Address 248 Connecticut Avenue NE		Amount of Each Receipt this Period 100.00
City Atlanta	State GA	Zip Code 30307
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Georgia State University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	215.00
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 1067 OF 2648
	<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)
EMILY's List

A. Ms. Nina R. McCoy
Full Name (Last, First, Middle Initial)
Mailing Address 1116 Delrose Ct
City Springfield State OR Zip Code 97477
FEC ID number of contributing federal political committee. **C**
Name of Employer Social Science Research Council Occupation Public Health Specialist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 12 / 18 / 2014
Transaction ID : 4238198
Amount of Each Receipt this Period 100.00

B. Daryl McCullough
Full Name (Last, First, Middle Initial)
Mailing Address 136 Salem Dr.
City Ithaca State NY Zip Code 14850
FEC ID number of contributing federal political committee. **C**
Name of Employer Atc-Ny Occupation Computer Scientist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 265.00

Date of Receipt 11 / 28 / 2014
Transaction ID : 4229058
Amount of Each Receipt this Period 20.00

c. Daryl McCullough
Full Name (Last, First, Middle Initial)
Mailing Address 136 Salem Dr.
City Ithaca State NY Zip Code 14850
FEC ID number of contributing federal political committee. **C**
Name of Employer Atc-Ny Occupation Computer Scientist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 265.00

Date of Receipt 12 / 28 / 2014
Transaction ID : 4242200
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... 140.00
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 1068 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Joan McCullough
 Full Name (Last, First, Middle Initial)
 Mailing Address POB 2343, 25225 Palomar Rd
 City Idyllwild State CA Zip Code 92549
 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 ▼ 515.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232653
 Amount of Each Receipt this Period
 10.00

B. Ms. Bonnie L. McCune
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 View Ct.
 City Aptos State CA Zip Code 95003
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233631
 Amount of Each Receipt this Period
 15.00

C. Susan McDaniel
 Full Name (Last, First, Middle Initial)
 Mailing Address 18508 104th Street KPN
 City Gig Harbor State WA Zip Code 98329
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234238
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 1069 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Sarah S. McDermott		Date of Receipt 12 / 03 / 2014 Transaction ID : 4232070
Mailing Address 4389 Malia Street #603		Amount of Each Receipt this Period 40.00
City Honolulu	State HI	Zip Code 96821
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer None	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2050.00	

Full Name (Last, First, Middle Initial) B. Mrs. Sarah S. McDermott		Date of Receipt 12 / 06 / 2014 Transaction ID : 4232549
Mailing Address 4389 Malia Street #603		Amount of Each Receipt this Period 50.00
City Honolulu	State HI	Zip Code 96821
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2050.00	

Full Name (Last, First, Middle Initial) C. Mary McDonald		Date of Receipt 12 / 03 / 2014 Transaction ID : 4231660
Mailing Address 1107 Arcadia Ave		Amount of Each Receipt this Period 50.00
City Austin	State TX	Zip Code 78757
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Railroad Commission Of Texas	Occupation Director, Pipeline Safety Division	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 1070 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cheryl McDonald		Date of Receipt M M M / D D D / Y Y Y Y Y 11 / 27 / 2014 Transaction ID : 4228364
Mailing Address 2010 N Beal St		Amount of Each Receipt this Period 25.00
City Belton	State TX	Zip Code 76513
FEC ID number of contributing federal political committee. C		
Name of Employer Texas A&M University	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Cheryl McDonald		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 27 / 2014 Transaction ID : 4241195
Mailing Address 2010 N Beal St		Amount of Each Receipt this Period 25.00
City Belton	State TX	Zip Code 76513
FEC ID number of contributing federal political committee. C		
Name of Employer Texas A&M University	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Virginia McDonnell		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232155
Mailing Address 29 Henry St		Amount of Each Receipt this Period 21.00
City Succasunna	State NJ	Zip Code 07876
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

SUBTOTAL of Receipts This Page (optional).....▶	71.00
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 1071 OF 2648
	<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)
EMILY's List

A. Ms. Virginia H. McDougle
 Full Name (Last, First, Middle Initial)
 Mailing Address 5935 N High St Apt 108
 City State Zip Code
 Worthington OH 43085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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
 12 / 05 / 2014
Transaction ID : 4232686
 Amount of Each Receipt this Period
 25.00

B. Ms. Marjorie E. McDowell
 Full Name (Last, First, Middle Initial)
 Mailing Address 13900 Marquesas Way, Apt. 3410
 City State Zip Code
 Marina Del Rey CA 90292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230623
 Amount of Each Receipt this Period
 150.00

C. Ms. Suzanne R McDowell
 Full Name (Last, First, Middle Initial)
 Mailing Address 4821 Ft Sumner Dr
 City State Zip Code
 Bethesda MD 20816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Steptoe & Johnon Llp Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230180
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	275.00
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 1072 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Suzanne R McDowell		Date of Receipt
Mailing Address 4821 Ft Sumner Dr		M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014
City	State	Zip Code
Bethesda	MD	20816
FEC ID number of contributing federal political committee. C		Transaction ID : 4240005
Name of Employer Step toe & Johnon Llp		Amount of Each Receipt this Period
Occupation Requested		100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	1200.00	

Full Name (Last, First, Middle Initial) B. Ms. Dusa McDuff		Date of Receipt
Mailing Address 3 Laurel Ln		M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
City	State	Zip Code
Setauket	NY	11733
FEC ID number of contributing federal political committee. C		Transaction ID : 4229060
Name of Employer Barnard College		Amount of Each Receipt this Period
Occupation Professor		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	1395.00	

Full Name (Last, First, Middle Initial) C. Ms. Dusa McDuff		Date of Receipt
Mailing Address 3 Laurel Ln		M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
City	State	Zip Code
Setauket	NY	11733
FEC ID number of contributing federal political committee. C		Transaction ID : 4242201
Name of Employer Barnard College		Amount of Each Receipt this Period
Occupation Professor		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	1395.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 1073 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Susan McFall
 Full Name (Last, First, Middle Initial)
 Mailing Address 1718 Grady Drive
 City State Zip Code
 Durham NC 27712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Nc Dept Of Transportation Accountant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236309
 Amount of Each Receipt this Period
 25.00

B. Ms. Joan McFarland
 Full Name (Last, First, Middle Initial)
 Mailing Address 2701 Land Park Drive
 City State Zip Code
 Sacramento CA 95818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Requested Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230624
 Amount of Each Receipt this Period
 75.00

C. William McFarlane
 Full Name (Last, First, Middle Initial)
 Mailing Address 234 1/2 9th Street
 City State Zip Code
 West Palm Beach FL 33401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Requested Requested
 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
 12 / 26 / 2014
Transaction ID : 4240712
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 1074 OF 2648
	<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)
EMILY's List

A. Kathleen McGarrigle
 Full Name (Last, First, Middle Initial)
 Mailing Address 20763 Northampton St.
 City Diamond Bar State CA Zip Code 91789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Azusa Unified School District Occupation Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 28 / 2014
Transaction ID : 4229061
 Amount of Each Receipt this Period
 25.00

B. Kathleen McGarrigle
 Full Name (Last, First, Middle Initial)
 Mailing Address 20763 Northampton St.
 City Diamond Bar State CA Zip Code 91789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Azusa Unified School District Occupation Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 12 / 28 / 2014
Transaction ID : 4242202
 Amount of Each Receipt this Period
 25.00

C. Ms. Mary B. McGee
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 2275
 City Gardnerville State NV Zip Code 89410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 12 / 17 / 2014
Transaction ID : 4237932
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 1075 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. D. E. McGill		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014
Mailing Address POB 619		Transaction ID : 4238755
City Bayfield	State CO	Zip Code 81122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1470.00	

Full Name (Last, First, Middle Initial) B. Dr. Mary Joyce McGinnis		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 739 St. Marks Ln.		Transaction ID : 4229062
City Niskayuna	State NY	Zip Code 12309
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self Employed	Occupation OB GYN Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. Dr. Mary Joyce McGinnis		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
Mailing Address 739 St. Marks Ln.		Transaction ID : 4242203
City Niskayuna	State NY	Zip Code 12309
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self Employed	Occupation OB GYN Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 1076 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Larry McGlamary
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Claybrook Ave.
 City Kilmarnock State VA Zip Code 22482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer lbew Occupation International Representative
 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
 12 / 03 / 2014
Transaction ID : 4231812
 Amount of Each Receipt this Period
 25.00

B. Maureen McGovern
 Full Name (Last, First, Middle Initial)
 Mailing Address 8530 Wilshire Blvd. Suite 200
 City Beverly Hills State CA Zip Code 90211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Singer/Actor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228396
 Amount of Each Receipt this Period
 35.00

C. Maureen McGovern
 Full Name (Last, First, Middle Initial)
 Mailing Address 8530 Wilshire Blvd. Suite 200
 City Beverly Hills State CA Zip Code 90211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Singer/Actor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233468
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 1077 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith McGrath		Date of Receipt
Mailing Address 15 West 89th Street		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
New York	NY	10024
FEC ID number of contributing federal political committee.		Transaction ID : 4229063
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
Sony Music Entertainment	Digital Media Executive	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="4700.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Judith McGrath		Date of Receipt
Mailing Address 15 West 89th Street		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
New York	NY	10024
FEC ID number of contributing federal political committee.		Transaction ID : 4242204
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
Sony Music Entertainment	Digital Media Executive	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="4700.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Janet McGrorty		Date of Receipt
Mailing Address 2615 North 59th St.		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Milwaukee	WI	53210
FEC ID number of contributing federal political committee.		Transaction ID : 4229064
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="230.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="220.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1078 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Janet McGrorty
 Full Name (Last, First, Middle Initial)
 Mailing Address 2615 North 59th St.
 City Milwaukee State WI Zip Code 53210
 Date of Receipt: 12 / 11 / 2014
Transaction ID : 4234979
 Amount of Each Receipt this Period: 20.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: None Occupation: None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 230.00

B. Ms. Janet McGrorty
 Full Name (Last, First, Middle Initial)
 Mailing Address 2615 North 59th St.
 City Milwaukee State WI Zip Code 53210
 Date of Receipt: 12 / 28 / 2014
Transaction ID : 4242205
 Amount of Each Receipt this Period: 20.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: None Occupation: None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 230.00

C. Ms. Mary Selden McKee
 Full Name (Last, First, Middle Initial)
 Mailing Address 2671 Wilson St.
 City Port Townsend State WA Zip Code 98368
 Date of Receipt: 12 / 12 / 2014
Transaction ID : 4235821
 Amount of Each Receipt this Period: 20.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: None Occupation: None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 620.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 1079 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Leona McKee
 Full Name (Last, First, Middle Initial)
 Mailing Address 4929 Cascade Pl
 City State Zip Code
 Oak Harbor WA 98277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231539
 Amount of Each Receipt this Period
 30.00

B. Ms. Margaret F. McKeel
 Full Name (Last, First, Middle Initial)
 Mailing Address 1400 Waverly Road, Villa-56
 City State Zip Code
 Gladwyne PA 19035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 12 / 2014
Transaction ID : 4235231
 Amount of Each Receipt this Period
 200.00

C. Kimberly McKeever
 Full Name (Last, First, Middle Initial)
 Mailing Address 7782 Reagan Rd.
 City State Zip Code
 Riverside CA 92509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Unemployed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238758
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 245.00
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 1080 OF 2648
	<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)
EMILY's List

A. Ms. Nancy A. McKenzie
 Full Name (Last, First, Middle Initial)
 Mailing Address 180 South King Street
 City Danbury State CT Zip Code 06811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Novelist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt
 12 / 20 / 2014
Transaction ID : 4239078
 Amount of Each Receipt this Period
200.00

B. Mr. James J. McKillop
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Zurich Ct
 City Pleasant Hill State CA Zip Code 94523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231124
 Amount of Each Receipt this Period
200.00

C. Ms. Karen McKinnon
 Full Name (Last, First, Middle Initial)
 Mailing Address 6429 Dorado Bch NE
 City Albuquerque State NM Zip Code 87111
 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 **755.00**

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231125
 Amount of Each Receipt this Period
375.00

SUBTOTAL of Receipts This Page (optional)..... **595.00**
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 1081 OF 2648
	<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)
EMILY's List

A. Ms. Ione McKnight
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 944
 City Republic State WA Zip Code 99166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Homemaker
 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
 12 / 01 / 2014
Transaction ID : 4230626
 Amount of Each Receipt this Period
150.00

B. Rev. Sara C. McLain
 Full Name (Last, First, Middle Initial)
 Mailing Address 639 Honeysuckle Drive
 City Madison State MS Zip Code 39110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Minister/Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **205.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233613
 Amount of Each Receipt this Period
10.00

C. Ms. Marilyn McLaughlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 2667 Berkshire Rd.
 City Cleveland State OH Zip Code 44106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cleveland University Occupation ESL Teacher
 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
 12 / 01 / 2014
Transaction ID : 4230629
 Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....	310.00
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 1082 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Katharine N. McLean		Date of Receipt
Mailing Address 58 Bailey Cir.		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City State Zip Code South Windsor CT 06074		Transaction ID : 4227443
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="200.00"/>
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 ▼ <input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Ocelia Jo McLean		Date of Receipt
Mailing Address 1256 Dunwoody Knoll Drive		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Dunwoody GA 30338		Transaction ID : 4229067
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
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 ▼ <input type="text" value="665.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Ocelia Jo McLean		Date of Receipt
Mailing Address 1256 Dunwoody Knoll Drive		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Dunwoody GA 30338		Transaction ID : 4241738
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
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 ▼ <input type="text" value="665.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1083 OF 2648
	<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)
EMILY's List

A. Ms. Ocelia Jo McLean
Full Name (Last, First, Middle Initial)

Mailing Address 1256 Dunwoody Knoll Drive

City Dunwoody State GA Zip Code 30338

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 ▼ **665.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4240007

Amount of Each Receipt this Period
30.00

B. Megan McLean
Full Name (Last, First, Middle Initial)

Mailing Address 14 E. Nelson St. Ste. 200

City Lexington State VA Zip Code 24450

FEC ID number of contributing federal political committee. **C**

Name of Employer University Occupation Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **234.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014

Transaction ID : 4239428

Amount of Each Receipt this Period
18.00

C. Megan McLean
Full Name (Last, First, Middle Initial)

Mailing Address 14 E. Nelson St. Ste. 200

City Lexington State VA Zip Code 24450

FEC ID number of contributing federal political committee. **C**

Name of Employer University Occupation Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **234.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014

Transaction ID : 4236476

Amount of Each Receipt this Period
53.00

SUBTOTAL of Receipts This Page (optional).....▶	101.00
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 1084 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Megan McLean

Mailing Address 14 E. Nelson St. Ste. 200

City Lexington	State VA	Zip Code 24450
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FEC ID number of contributing federal political committee. **C**

Name of Employer University	Occupation Administration
--------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : 4243440

Amount of Each Receipt this Period
53.00

Full Name (Last, First, Middle Initial)
B. Ms. Allison McMillan

Mailing Address 101 Gideon Lawton Lane

City Portsmouth	State RI	Zip Code 02871
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Providence Singers, Inc.	Occupation Executive Director
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2014

Transaction ID : 4236310

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Ms. Ann K. McNamee

Mailing Address 300 Olive Hill Lane

City Woodside	State CA	Zip Code 94062
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2014

Transaction ID : 4231370

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1073.00
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 1085 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Andrew McNerney		Date of Receipt 11 / 25 / 2014 Transaction ID : 4227435
Mailing Address PO Box 256		Amount of Each Receipt this Period 150.00
City Shoreham	State NY	Zip Code 11786
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Jillian McNerney		Date of Receipt 11 / 28 / 2014 Transaction ID : 4229069
Mailing Address 501 Forest Avve #402		Amount of Each Receipt this Period 25.00
City Palo Alto	State CA	Zip Code 94301
FEC ID number of contributing federal political committee. C		
Name of Employer Sri International	Occupation Operations Manager, Robotics	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Ms. Jillian McNerney		Date of Receipt 12 / 28 / 2014 Transaction ID : 4242208
Mailing Address 501 Forest Avve #402		Amount of Each Receipt this Period 25.00
City Palo Alto	State CA	Zip Code 94301
FEC ID number of contributing federal political committee. C		
Name of Employer Sri International	Occupation Operations Manager, Robotics	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 1086 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Alan McPherron		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238764
Mailing Address 1925 NE 19th, Apt 4		Amount of Each Receipt this Period 10.00
City Portland	State OR	Zip Code 97212
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 ▼ 320.00	

Full Name (Last, First, Middle Initial) B. Terry McPherson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229070
Mailing Address 28 China Cockle Way		Amount of Each Receipt this Period 20.00
City Hilton Head Island	State SC	Zip Code 29926
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Terry McPherson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242209
Mailing Address 28 China Cockle Way		Amount of Each Receipt this Period 20.00
City Hilton Head Island	State SC	Zip Code 29926
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 ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 1087 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Elaine A McReynolds
 Full Name (Last, First, Middle Initial)
 Mailing Address 1517 Naples Avenue
 City Nashville State TN Zip Code 37207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Semi Retired, Ins Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229823
 Amount of Each Receipt this Period
 100.00

B. Ms. Elaine A McReynolds
 Full Name (Last, First, Middle Initial)
 Mailing Address 1517 Naples Avenue
 City Nashville State TN Zip Code 37207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Semi Retired, Ins Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243420
 Amount of Each Receipt this Period
 100.00

C. Dee McWilliams
 Full Name (Last, First, Middle Initial)
 Mailing Address 5098 Donovan Drive
 City Alexandria State VA Zip Code 22304
 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 ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230151
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 1088 OF 2648
	<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)
EMILY's List

A. Dee McWilliams
Full Name (Last, First, Middle Initial)
Mailing Address 5098 Donovan Drive
City Alexandria State VA Zip Code 22304
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 ▼ 435.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 23 / 2014
Transaction ID : 4240008
Amount of Each Receipt this Period
25.00

B. Sally Mead
Full Name (Last, First, Middle Initial)
Mailing Address 2150 Stanford Dr
City Anchorage State AK Zip Code 99508
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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 25 / 2014
Transaction ID : 4229810
Amount of Each Receipt this Period
25.00

C. Sally Mead
Full Name (Last, First, Middle Initial)
Mailing Address 2150 Stanford Dr
City Anchorage State AK Zip Code 99508
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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240763
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 1089 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Martha L. Mecartney		Date of Receipt
Mailing Address 5 Zola Court		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Irvine	CA	92617
FEC ID number of contributing federal political committee.		Transaction ID : 4238234
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
University Of California	Professor	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Sherrell Medbery		Date of Receipt
Mailing Address 18 Philadelphia Ave		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Takoma Park	MD	20912
FEC ID number of contributing federal political committee.		Transaction ID : 4228027
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="360.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Sherrell Medbery		Date of Receipt
Mailing Address 18 Philadelphia Ave		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Takoma Park	MD	20912
FEC ID number of contributing federal political committee.		Transaction ID : 4240744
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="360.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="210.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1090 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Austin Meek		Date of Receipt
Mailing Address 4626 Karla St		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City State Zip Code Wichita Falls TX 76310		Transaction ID : 4237710
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="15.00"/>
Name of Employer Kickapoo Airport	Occupation Airport Lineman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="640.00"/>	

Full Name (Last, First, Middle Initial) B. Austin Meek		Date of Receipt
Mailing Address 4626 Karla St		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Wichita Falls TX 76310		Transaction ID : 4229071
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer Kickapoo Airport	Occupation Airport Lineman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="640.00"/>	

Full Name (Last, First, Middle Initial) C. Austin Meek		Date of Receipt
Mailing Address 4626 Karla St		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Wichita Falls TX 76310		Transaction ID : 4242210
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer Kickapoo Airport	Occupation Airport Lineman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="640.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1092 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Martha Mehta		Date of Receipt
Mailing Address 2315 Medford Rd.		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City State Zip Code Ann Arbor MI 48104		Transaction ID : 4227445
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="150.00"/>
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 ▼ <input type="text" value="450.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. Dady Mehta		Date of Receipt
Mailing Address 2315 Medford Rd.		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City State Zip Code Ann Arbor MI 48104		Transaction ID : 4242443
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="200.00"/>
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 ▼ <input type="text" value="1300.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Diane Jones Meier		Date of Receipt
Mailing Address 307 S Coulter DR		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City State Zip Code Bryan TX 77803		Transaction ID : 4231128
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer Requested	Occupation Non Profit Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="475.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1093 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Gilbert W. Meier
 Full Name (Last, First, Middle Initial)
 Mailing Address 6636 E Hill Dr
 City Austin State TX Zip Code 78731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237116
 Amount of Each Receipt this Period
 25.00

B. Mr. Gerald Meisner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Deerwood Court
 City Greensboro State NC Zip Code 27410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229596
 Amount of Each Receipt this Period
 20.00

C. Mr. Gerald Meisner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Deerwood Court
 City Greensboro State NC Zip Code 27410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241522
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 1094 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Anne Mellen		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237766
Mailing Address 4 Blazier Road		Amount of Each Receipt this Period 25.00
City Warren	State NJ	Zip Code 07059
FEC ID number of contributing federal political committee. C		
Name of Employer State Of New Jersey	Occupation Paralegal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00	

Full Name (Last, First, Middle Initial) B. Ms. Patricia Melsheimer		Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230242
Mailing Address 2640 Belgian Place		Amount of Each Receipt this Period 50.00
City Arroyo Grande	State CA	Zip Code 93420
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary E. Melton		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237524
Mailing Address 2786 Peachtree Walk		Amount of Each Receipt this Period 50.00
City Duluth	State GA	Zip Code 30096
FEC ID number of contributing federal political committee. C		
Name of Employer Mary E Melton PhD, PC	Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 1095 OF 2648
	<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	

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Keith Melton		Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2014 Transaction ID : 4234912
Mailing Address 54 Old Galisteo Way		Amount of Each Receipt this Period 25.00
City Santa Fe	State NM	Zip Code 87508
FEC ID number of contributing federal political committee. C	Name of Employer Santa Fe Community College	
Occupation Teacher		Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Melinda M. Mendelson		Date of Receipt M M / D D / Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227637
Mailing Address 103 Knoll Cir		Amount of Each Receipt this Period 250.00
City Saint Helena	State CA	Zip Code 94574
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation Retired		Aggregate Year-to-Date ▼ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Arlene Mendibles		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243233
Mailing Address 411 17th		Amount of Each Receipt this Period 15.00
City Sacramento	State CA	Zip Code 95811
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	
Occupation Sr. Consultant		Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	290.00
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 1096 OF 2648
	<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)
EMILY's List

A. Ms. Renee M. Menegaz-Bock
 Full Name (Last, First, Middle Initial)
 Mailing Address 5532 South Shore Dr #9d
 City Chicago State IL Zip Code 60637
 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 ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231961
 Amount of Each Receipt this Period
 35.00

B. Ms. Kristin L. Menon
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 Yarnall Pl
 City Redwood City State CA Zip Code 94063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Attorney Occupation Johnson & Johnson
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230177
 Amount of Each Receipt this Period
 50.00

C. Ms. Kristin L. Menon
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 Yarnall Pl
 City Redwood City State CA Zip Code 94063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Attorney Occupation Johnson & Johnson
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240843
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 1097 OF 2648
	<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)
EMILY's List

A. Donna Menzies
Full Name (Last, First, Middle Initial)
Mailing Address 2304 Wailea Pl
City Sacramento State CA Zip Code 95833
FEC ID number of contributing federal political committee. **C**
Name of Employer Center For Spiritual Awareness Occupation Admin Asst
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **360.00**

Date of Receipt **11 / 25 / 2014**
Transaction ID : 4230137
Amount of Each Receipt this Period **30.00**

B. Donna Menzies
Full Name (Last, First, Middle Initial)
Mailing Address 2304 Wailea Pl
City Sacramento State CA Zip Code 95833
FEC ID number of contributing federal political committee. **C**
Name of Employer Center For Spiritual Awareness Occupation Admin Asst
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **360.00**

Date of Receipt **12 / 26 / 2014**
Transaction ID : 4240782
Amount of Each Receipt this Period **30.00**

C. Patricia Merchant
Full Name (Last, First, Middle Initial)
Mailing Address 344 Candler St NE
City Atlanta State GA Zip Code 30307
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Episcopal Priest
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt **11 / 25 / 2014**
Transaction ID : 4230167
Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... **110.00**
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 1098 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Patricia Merchant		Date of Receipt M M / D D / Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240833
Mailing Address 344 Candler St NE		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30307
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Episcopal Priest	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Dr. Stephanie A. Mercier		Date of Receipt M M / D D / Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4234643
Mailing Address 6155-L Edsall Road		Amount of Each Receipt this Period 125.00
City Alexandria	State VA	Zip Code 22304
FEC ID number of contributing federal political committee. C		
Name of Employer Farm Journal Foundation	Occupation Economist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. John Merner		Date of Receipt M M / D D / Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229074
Mailing Address 720 Seneca St Apt 815		Amount of Each Receipt this Period 20.00
City Seattle	State WA	Zip Code 98101
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	

SUBTOTAL of Receipts This Page (optional).....▶	195.00
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 1099 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. John Werner

Mailing Address 720 Seneca St Apt 815

City Seattle	State WA	Zip Code 98101
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4242213

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Sarah Bishop Merrill , Ph.D.

Mailing Address 2214 E Pendleton St

City Harlingen	State TX	Zip Code 78550
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FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested Teacher
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234233

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Jeneil Merritt

Mailing Address PO Box 240

City Salt Lake City	State UT	Zip Code 84110
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Self	Occupation Requested Citizen Activist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234217

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 1100 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margaret Merryfield
 Full Name (Last, First, Middle Initial)
 Mailing Address 2620 Vuelta Grande Ave
 City Long Beach State CA Zip Code 90815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Unviveristy Occupation Academic Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231442
 Amount of Each Receipt this Period
 300.00

B. Mr. Wallace Mersereau
 Full Name (Last, First, Middle Initial)
 Mailing Address 66 Bovet Road, Ste. 330
 City San Mateo State CA Zip Code 94402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Investor
 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
 12 / 09 / 2014
Transaction ID : 4233968
 Amount of Each Receipt this Period
 100.00

C. Ms. Amy Mesner
 Full Name (Last, First, Middle Initial)
 Mailing Address 2524 28th Street
 City Central City State NE Zip Code 68826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ed Markey For Senate Occupation Researcher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240009
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 430.00
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 1101 OF 2648
	<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)
EMILY's List

A. Kathryn Mesner
Full Name (Last, First, Middle Initial)

Mailing Address 2524 28th Street

City Central City State NE Zip Code 68826

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014

Transaction ID : 4233718

Amount of Each Receipt this Period
 100.00

B. Roger Messenger
Full Name (Last, First, Middle Initial)

Mailing Address 3115 S Ocean Blvd #501

City Highland Beach State FL Zip Code 33487

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4236677

Amount of Each Receipt this Period
 15.00

C. Roger Messenger
Full Name (Last, First, Middle Initial)

Mailing Address 3115 S Ocean Blvd #501

City Highland Beach State FL Zip Code 33487

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237758

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00

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 1102 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Susan E. Messina		Date of Receipt 12 / 10 / 2014 Transaction ID : 4234592
Mailing Address 910 Hilldale Ave.		Amount of Each Receipt this Period 15.00
City Berkeley	State CA	
Zip Code 94708		Aggregate Year-to-Date ▼ 2140.00
FEC ID number of contributing federal political committee. C		
Name of Employer Solano Community College	Occupation College Instructor	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Mrs. Susan E. Messina		Date of Receipt 12 / 02 / 2014 Transaction ID : 4231130
Mailing Address 910 Hilldale Ave.		Amount of Each Receipt this Period 250.00
City Berkeley	State CA	
Zip Code 94708		Aggregate Year-to-Date ▼ 2140.00
FEC ID number of contributing federal political committee. C		
Name of Employer Solano Community College	Occupation College Instructor	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Hon. Sharon Wallis Mettler		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233399
Mailing Address P.O. Box 80595		Amount of Each Receipt this Period 25.00
City Bakersfield	State CA	
Zip Code 93380		Aggregate Year-to-Date ▼ 300.00
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....	290.00
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 1103 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Anita B. Metzen
 Full Name (Last, First, Middle Initial)
 Mailing Address 4100 W. Worley St., Apt. 107
 City Columbia State MO Zip Code 65203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228346
 Amount of Each Receipt this Period
25.00

B. Ms. Mary Meyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 213 S Sherwood St
 City Fort Collins State CO Zip Code 80521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Colorado State University Professor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **480.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229077
 Amount of Each Receipt this Period
40.00

C. Ms. Mary Meyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 213 S Sherwood St
 City Fort Collins State CO Zip Code 80521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Colorado State University Professor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **480.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242215
 Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **105.00**
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 1104 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Nancy L. Meyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 Hayfields Rd.
 City Portola Valley State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1473.00

Date of Receipt
 12 / 17 / 2014
Transaction ID : 4237742
 Amount of Each Receipt this Period
 25.00

B. Ms. Nancy L. Meyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 Hayfields Rd.
 City Portola Valley State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1473.00

Date of Receipt
 12 / 10 / 2014
Transaction ID : 4244738
 Amount of Each Receipt this Period
 85.00

C. Ms. Mary T. Meyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 2315 Traemoor Village Pl.
 City Nashville State TN Zip Code 37209
 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 ▼ 290.00

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4233685
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 1105 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Rita S. Meyers
 Full Name (Last, First, Middle Initial)
 Mailing Address 5809 Nicholson Ln. Ph. 1514
 City Rockville State MD Zip Code 20852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237498
 Amount of Each Receipt this Period
 75.00

B. Mrs. Cecile Butman Michael
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 El Sereno Court
 City San Francisco State CA Zip Code 94127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229767
 Amount of Each Receipt this Period
 20.00

C. Mrs. Cecile Butman Michael
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 El Sereno Court
 City San Francisco State CA Zip Code 94127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240011
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 1106 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Diane Mick Feldman
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 East 77th Street
 Apt. 934
 City New York State NY Zip Code 10162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234929
 Amount of Each Receipt this Period
 25.00

B. Ms. Melissa B. Mickey
 Full Name (Last, First, Middle Initial)
 Mailing Address 5312 S. Hyde Park Blvd., Apt. 1
 City Chicago State IL Zip Code 60615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238772
 Amount of Each Receipt this Period
 25.00

C. Ms. Joan Middleton
 Full Name (Last, First, Middle Initial)
 Mailing Address 3920 Grand Ave., Unit 100
 City Des Moines State IA Zip Code 50312
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233093
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 1107 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Gretchen Mieszkowski		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2014
Mailing Address 4023 Manorfield Drive		Transaction ID : 4239394
City Seabrook	State TX	Zip Code 77586
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 400.00	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) B. Eiji Miki		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014
Mailing Address 5 Sally Sweets Way #129		Transaction ID : 4236652
City Salem	State NH	Zip Code 03079
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00	
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 ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Ms. Gloria Mikuls		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2014
Mailing Address 8545 Carmel Valley Rd.		Transaction ID : 4242722
City Carmel	State CA	Zip Code 93923
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
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	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 1108 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Frances Milberg

Mailing Address 150 E 56th Sr

City State Zip Code
New York NY 10022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4240012

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Connie K Miles

Mailing Address 2808 SW 98th Dr

City State Zip Code
Gainesville FL 32608

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 ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4229080

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Ms. Connie K Miles

Mailing Address 2808 SW 98th Dr

City State Zip Code
Gainesville FL 32608

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 ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241523

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

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 1109 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Edith Miles
 Full Name (Last, First, Middle Initial)
 Mailing Address 7202 Broxburn Dr
 City Bethesda State MD Zip Code 20817
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230640
 Amount of Each Receipt this Period
 100.00

B. Ms. Kathy Ann Milholland
 Full Name (Last, First, Middle Initial)
 Mailing Address 3601 Wisconsin Ave. N.W.
 Apt. 605 Apt. 6
 City Washington State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 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 / 26 / 2014
Transaction ID : 4227697
 Amount of Each Receipt this Period
 150.00

C. Larry Milhon
 Full Name (Last, First, Middle Initial)
 Mailing Address 3733 Timber Ridge Ct
 City Topeka State KS Zip Code 66610
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230133
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	275.00
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 1110 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Larry Milhon

Mailing Address 3733 Timber Ridge Ct

City State Zip Code
Topeka KS 66610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

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
 12 / 23 / 2014
Transaction ID : 4240013

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Ms. Euridis Millan

Mailing Address 2425 N Sawyer Ave
Apt 2

City State Zip Code
Chicago IL 60647

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

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
 12 / 02 / 2014
Transaction ID : 4231131

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Peter Miller

Mailing Address 510 Broadway #3

City State Zip Code
New York NY 10012

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
College Of Staten Island/ Cuny Associate Professor Of English

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237135

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

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 1111 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Mara Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 2452 Tusitala St., #1106
 City Honolulu State HI Zip Code 96815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hawaii Tokai International College Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 12 / 20 / 2014
Transaction ID : 4239219
 Amount of Each Receipt this Period
 50.00

B. Ms. Althea L Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 1520 10th Street
 City Manhattan Beach State CA Zip Code 90266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Miller & Company Reporters Occupation Court Reporter
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 12 / 10 / 2014
Transaction ID : 4234427
 Amount of Each Receipt this Period
 100.00

C. Kathie Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 3113 Carrigan Canyon
 City Salt Lake City State UT Zip Code 84109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Housewife/Community Advocate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 12 / 12 / 2014
Transaction ID : 4236040
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
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 1112 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Judith B. Miller		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014
Mailing Address 2800 Stonecliff Drive #105		Transaction ID : 4238775
City Baltimore	State MD	Zip Code 21209
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 343.00	

Full Name (Last, First, Middle Initial) B. Judith Miller		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014
Mailing Address 408 Palmwood		Transaction ID : 4230051
City Delta	State OH	Zip Code 43515
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
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 ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Judith Miller		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014
Mailing Address 408 Palmwood		Transaction ID : 4240015
City Delta	State OH	Zip Code 43515
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
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 ▼ 220.00	

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 1113 OF 2648
	<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)
EMILY's List

A. Ms. Audrey Miller
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 888

City Ferndale State CA Zip Code 95536

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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014

Transaction ID : 4232484

Amount of Each Receipt this Period
 20.00

B. Susan Miller
Full Name (Last, First, Middle Initial)

Mailing Address 25590 County Road 28

City La Junta State CO Zip Code 81050

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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014

Transaction ID : 4234603

Amount of Each Receipt this Period
 20.00

C. Ms. Charlotte Miller
Full Name (Last, First, Middle Initial)

Mailing Address 1343 NW Deer Drive

City Toledo State OR Zip Code 97391

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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237771

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 1114 OF 2648
	<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)
EMILY's List

A. Mr. Charles Miller
Full Name (Last, First, Middle Initial)

Mailing Address 38 Oil St

City Tiffin State OH Zip Code 44883

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 ▼ **592.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014

Transaction ID : 4231133

Amount of Each Receipt this Period
53.00

B. Ms. Suzanne M. Miller
Full Name (Last, First, Middle Initial)

Mailing Address 4473 Amiens Ave.

City Fremont State CA Zip Code 94555

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 ▼ **725.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014

Transaction ID : 4234722

Amount of Each Receipt this Period
100.00

C. Ms. Regina Gouger Miller
Full Name (Last, First, Middle Initial)

Mailing Address 211 N Tulpehocken Rd

City Reading State PA Zip Code 19601

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 ▼ **1270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237384

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **403.00**

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 1115 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Concetta B. Miller		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233708
Mailing Address 137 East 36th Street #26k		Amount of Each Receipt this Period 50.00
City New York	State NY	Zip Code 10016
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 ▼ 1400.00	

Full Name (Last, First, Middle Initial) B. Pamela Miller		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232001
Mailing Address 29 S. 3rd St., Apt. 213		Amount of Each Receipt this Period 10.00
City Harrisburg	State PA	Zip Code 17101
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Student/Activist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. Ms. Beth Miller		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239650
Mailing Address 14680 Descanso Dr		Amount of Each Receipt this Period 40.00
City Perris	State CA	Zip Code 92570
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 1116 OF 2648
	<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)
EMILY's List

A. Penny I. Miller
Full Name (Last, First, Middle Initial)

Mailing Address 15941 252nd Ave SE

City Issaquah State WA Zip Code 98027

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Transcriptionist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 20 / 2014
Transaction ID : 4239166

Amount of Each Receipt this Period
25.00

B. Eric Miller
Full Name (Last, First, Middle Initial)

Mailing Address 18 Division St

City Saratoga Springs State NY Zip Code 12866

FEC ID number of contributing federal political committee. **C**

Name of Employer State Farm Insurance Occupation Claim Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234160

Amount of Each Receipt this Period
100.00

C. Nancy A. Miller
Full Name (Last, First, Middle Initial)

Mailing Address 70650 Sawley Way

City Tallahassee State FL Zip Code 32317

FEC ID number of contributing federal political committee. **C**

Name of Employer Walter R. McDonald & Associates, Inc. Occupation Business Analyst/Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
11 / 26 / 2014
Transaction ID : 4228033

Amount of Each Receipt this Period
17.00

SUBTOTAL of Receipts This Page (optional).....▶	142.00
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 1117 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Nancy A. Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 70650 Sawley Way
 City Tallahassee State FL Zip Code 32317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Walter R. McDonald & Associates, Inc. Occupation Business Analyst/Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240694
 Amount of Each Receipt this Period
 17.00

B. James Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 2713 Bartons Bluff Lane
 City Austin State TX Zip Code 78746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Social Worker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229083
 Amount of Each Receipt this Period
 10.00

C. James Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 2713 Bartons Bluff Lane
 City Austin State TX Zip Code 78746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Social Worker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242218
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	37.00
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 1118 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Kathleen Miller Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 811
 City Boulder Creek State CA Zip Code 95006
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240016
 Amount of Each Receipt this Period
 200.00

B. Susan Milligan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1401 St. James Parkway
 City Concord State CA Zip Code 94521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229084
 Amount of Each Receipt this Period
 100.00

C. Susan Milligan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1401 St. James Parkway
 City Concord State CA Zip Code 94521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242219
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
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 1119 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Julie Milligan		Date of Receipt
Mailing Address 3019 Third Street Unit 301		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Santa Monica	State CA	Zip Code 90405
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4228035
Name of Employer Silverman & Milligan Llp	Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="25.00"/>
	<input type="text" value="540.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Julie Milligan		Date of Receipt
Mailing Address 3019 Third Street Unit 301		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Santa Monica	State CA	Zip Code 90405
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4240788
Name of Employer Silverman & Milligan Llp	Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="25.00"/>
	<input type="text" value="540.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Lesley Mills		Date of Receipt
Mailing Address 132 Beach Avenue		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City Milford	State CT	Zip Code 06460
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4239503
Name of Employer Iota, Inc.	Occupation Owner, Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>
	<input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="550.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1120 OF 2648
	<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)
EMILY's List

A. Ms. Dixie L. Mills
Full Name (Last, First, Middle Initial)
Mailing Address 9801 Emerald Links Dr.
City Tampa State FL Zip Code 33626
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4229085
Amount of Each Receipt this Period
50.00

B. Ms. Dixie L. Mills
Full Name (Last, First, Middle Initial)
Mailing Address 9801 Emerald Links Dr.
City Tampa State FL Zip Code 33626
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241524
Amount of Each Receipt this Period
50.00

C. Ms. Joyanne B. Mills
Full Name (Last, First, Middle Initial)
Mailing Address 40W665 Grand Monde Drive
City Elburn State IL Zip Code 60119
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 ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 15 / 2014
Transaction ID : 4236570
Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
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 1121 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Deborah A. Mills

Mailing Address 457 Fdr Dr

City State Zip Code
New York NY 10002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Employed Woodcarver/Artist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239121

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
B. Marjorie Milroy

Mailing Address 11039 Miners Place

City State Zip Code
Nevada City CA 95959

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228381

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Marjorie Milroy

Mailing Address 11039 Miners Place

City State Zip Code
Nevada City CA 95959

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241198

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

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 1122 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Robert Milstein		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229086
Mailing Address 2225 Tilsby Ct		Amount of Each Receipt this Period 10.00
City Ann Arbor	State MI	Zip Code 48106
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 ▼ 305.00	

Full Name (Last, First, Middle Initial) B. Robert Milstein		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242220
Mailing Address 2225 Tilsby Ct		Amount of Each Receipt this Period 10.00
City Ann Arbor	State MI	Zip Code 48106
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 ▼ 305.00	

Full Name (Last, First, Middle Initial) C. Ms. Darlene Mindrum		Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230646
Mailing Address 4850 G Loop Rd.		Amount of Each Receipt this Period 45.00
City Bow	State WA	Zip Code 98232
FEC ID number of contributing federal political committee. C	Name of Employer Requested	Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 1123 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Phyllis M. Minehart		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242433
Mailing Address 5015 35th Avenue S. Apt. 224		Amount of Each Receipt this Period 25.00
City Minneapolis	State MN	Zip Code 55417
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Ms. Elizabeth K. Minnich		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229087
Mailing Address 1320 Fillmore Ave #500		Amount of Each Receipt this Period 100.00
City Charlotte	State NC	Zip Code 28203
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth K. Minnich		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241525
Mailing Address 1320 Fillmore Ave #500		Amount of Each Receipt this Period 100.00
City Charlotte	State NC	Zip Code 28203
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 1124 OF 2648
	<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)
EMILY's List

A. Ms. Susan Minter
Full Name (Last, First, Middle Initial)
Mailing Address 3314 Mackland Ave NE
City Albuquerque State NM Zip Code 87106
FEC ID number of contributing federal political committee. **C**
Name of Employer Unm Occupation Business Analyst
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt
12 / 06 / 2014
Transaction ID : 4232560
Amount of Each Receipt this Period
10.00

B. Dr. Paul Mintz
Full Name (Last, First, Middle Initial)
Mailing Address 200 Reading Blvd
City Wyomissing State PA Zip Code 19610
FEC ID number of contributing federal political committee. **C**
Name of Employer Reading Anesthesia Associates Occupation Anesthesiologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232854
Amount of Each Receipt this Period
30.00

C. Ms. Julia Ann A. Misplon
Full Name (Last, First, Middle Initial)
Mailing Address 806 Hudson Avenue
City Takoma Park State MD Zip Code 20912
FEC ID number of contributing federal political committee. **C**
Name of Employer US Government Occupation Microbiologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
11 / 25 / 2014
Transaction ID : 4230095
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 1125 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Julia Ann A. Misplon
 Full Name (Last, First, Middle Initial)
 Mailing Address 806 Hudson Avenue
 City Takoma Park State MD Zip Code 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US Government Occupation Microbiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240017
 Amount of Each Receipt this Period
 200.00

B. Mrs. Dolores Mitche
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 Russell Ave.
 City Watertown State MA Zip Code 02472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Common of MA Occupation EXEC. DIRECTOR
 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
 12 / 01 / 2014
Transaction ID : 4230647
 Amount of Each Receipt this Period
 100.00

C. Daniel Mitchell
 Full Name (Last, First, Middle Initial)
 Mailing Address 3119 W Commodore Way, Apt. 3d
 City Seattle State WA Zip Code 98199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bnsf Railroad Occupation Requested
 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 / 27 / 2014
Transaction ID : 4228344
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 1126 OF 2648
	<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)
EMILY's List

A. Daniel Mitchell
Full Name (Last, First, Middle Initial)
Mailing Address 3119 W Commodore Way, Apt. 3d
City Seattle State WA Zip Code 98199
FEC ID number of contributing federal political committee. **C**
Name of Employer Bnsf Railroad Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 27 / 2014
Transaction ID : 4241181
Amount of Each Receipt this Period 25.00

B. Ms. Sally Mitchell
Full Name (Last, First, Middle Initial)
Mailing Address 17 W. Phil Ellena St.
City Philadelphia State PA Zip Code 19119
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 13 / 2014
Transaction ID : 4236131
Amount of Each Receipt this Period 15.00

C. Ms. Sally Mitchell
Full Name (Last, First, Middle Initial)
Mailing Address 17 W. Phil Ellena St.
City Philadelphia State PA Zip Code 19119
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 01 / 2014
Transaction ID : 4230648
Amount of Each Receipt this Period 225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 265.00
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 1127 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Debbie Mitchell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229088
Mailing Address 3910 SW Huber St		Amount of Each Receipt this Period 25.00
City Portland	State OR	Zip Code 97219
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 295.00
Name of Employer Salem Keizer School District	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

Full Name (Last, First, Middle Initial) B. Debbie Mitchell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241362
Mailing Address 3910 SW Huber St		Amount of Each Receipt this Period 25.00
City Portland	State OR	Zip Code 97219
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 295.00
Name of Employer Salem Keizer School District	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

Full Name (Last, First, Middle Initial) C. Ms. Heather Mithoefer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229090
Mailing Address PO Box 988		Amount of Each Receipt this Period 75.00
City El Prado	State NM	Zip Code 87529
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 310.00
Name of Employer Unemployed	Occupation Graphic Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 1128 OF 2648
	<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)
EMILY's List

A. Ms. Heather Mithoefer
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 988

City El Prado State NM Zip Code 87529

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Graphic Designer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt **12 / 28 / 2014**

Transaction ID : 4242222

Amount of Each Receipt this Period **25.00**

B. Ms. Miriam Mittenenthal
Full Name (Last, First, Middle Initial)

Mailing Address 507 Chestnut Avenue

City Baltimore State MD Zip Code 21204

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **12 / 12 / 2014**

Transaction ID : 4235324

Amount of Each Receipt this Period **500.00**

C. Kimberly Miyazawa Frank
Full Name (Last, First, Middle Initial)

Mailing Address 916 Puulani Place Box 630406

City Lanai City State HI Zip Code 96763

FEC ID number of contributing federal political committee. **C**

Name of Employer Pulama Lanai Occupation Community Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **635.00**

Date of Receipt **11 / 28 / 2014**

Transaction ID : 4229091

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **625.00**

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 1129 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kimberly Miyazawa Frank		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241264
Mailing Address 916 Puulani Place Box 630406		Amount of Each Receipt this Period 100.00
City Lanai City	State HI	Zip Code 96763
FEC ID number of contributing federal political committee. C		
Name of Employer Pulama Lanai	Occupation Community Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 635.00	

Full Name (Last, First, Middle Initial) B. Ms. Alison Mizner		Date of Receipt M M / D D / Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233671
Mailing Address 2 West Court		Amount of Each Receipt this Period 25.00
City Waterville	State ME	Zip Code 04901
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 ▼ 275.00	

Full Name (Last, First, Middle Initial) C. Ms. Margaret Moench		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228427
Mailing Address 2931 Pierce St		Amount of Each Receipt this Period 25.00
City San Francisco	State CA	Zip Code 94123
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1130 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Margaret Moench

Mailing Address 2931 Pierce St

City State Zip Code
San Francisco CA 94123

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 ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241222

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
B. Maria Moesch

Mailing Address 934 Hickory Way

City State Zip Code
Fremont CA 94536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Nonr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
545.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238781

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Maria Moesch

Mailing Address 934 Hickory Way

City State Zip Code
Fremont CA 94536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Nonr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
545.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238780

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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 1131 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Maria Moesch			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243430
Mailing Address 934 Hickory Way			Amount of Each Receipt this Period 250.00
City Fremont	State CA	Zip Code 94536	
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Nonr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 545.00		

Full Name (Last, First, Middle Initial) B. Ms. Nelda G. Mold			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236657
Mailing Address 4901 Whitfield Rd.			Amount of Each Receipt this Period 12.00
City Durham	State NC	Zip Code 27707	
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 ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Ms. Ann Molison			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2014 Transaction ID : 4239415
Mailing Address 1307 Front Nine Drive			Amount of Each Receipt this Period 15.00
City Fort Collins	State CO	Zip Code 80525	
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation None		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00		

SUBTOTAL of Receipts This Page (optional).....▶	277.00
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 1132 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patricia B. Moll
 Full Name (Last, First, Middle Initial)
 Mailing Address 4104 N Lynn Ave
 City Tampa State FL Zip Code 33603
 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 ▼ 1600.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4227613
 Amount of Each Receipt this Period 500.00

B. Mrs. Margaret R. Monaghan
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 131402
 City Birmingham State AL Zip Code 35213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4234847
 Amount of Each Receipt this Period 500.00

C. Ms. Elizabeth Monaghan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Evergreen Ln
 City Marlton State NJ Zip Code 08053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 12 / 05 / 2014
Transaction ID : 4232672
 Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1015.00
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 1133 OF 2648
	(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)
EMILY's List

A. Mr. Michael Monar
Full Name (Last, First, Middle Initial)

Mailing Address 1236 Chicago Avenue
408

City Evanston State IL Zip Code 60202

FEC ID number of contributing federal political committee. **C**

Name of Employer Monar Consulting, Inc. Occupation Industrial Organizational Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
12 / 16 / 2014
Transaction ID : 4237086

Amount of Each Receipt this Period
14.00

B. Ms. Florence C. Monnier
Full Name (Last, First, Middle Initial)

Mailing Address 43 Ridge Road

City Pleasant Ridge State MI Zip Code 48069

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 ▼
400.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230652

Amount of Each Receipt this Period
200.00

C. Elaine Monnier
Full Name (Last, First, Middle Initial)

Mailing Address 316 S. 46th St.

City Lincoln State NE Zip Code 68510

FEC ID number of contributing federal political committee. **C**

Name of Employer State Of Nebraska Occupation It Applications Developer Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
12 / 20 / 2014
Transaction ID : 4239140

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 224.00

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 1134 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Elaine Monnier		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229094
Mailing Address 316 S. 46th St.		Amount of Each Receipt this Period 15.00
City Lincoln	State NE	Zip Code 68510
FEC ID number of contributing federal political committee. C		
Name of Employer State Of Nebraska	Occupation It Applications Developer Sr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. Elaine Monnier		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241346
Mailing Address 316 S. 46th St.		Amount of Each Receipt this Period 15.00
City Lincoln	State NE	Zip Code 68510
FEC ID number of contributing federal political committee. C		
Name of Employer State Of Nebraska	Occupation It Applications Developer Sr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. Faith Monson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229095
Mailing Address 1934 Foxhall Rd		Amount of Each Receipt this Period 50.00
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Business Coach	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 1135 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Faith Monson		Date of Receipt 12 / 28 / 2014 Transaction ID : 4241247
Mailing Address 1934 Foxhall Rd		Amount of Each Receipt this Period 50.00
City McLean	State VA	
Zip Code 22101		Aggregate Year-to-Date ▼ 650.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Business Coach	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Mr. Phillip Montague		Date of Receipt 12 / 11 / 2014 Transaction ID : 4234845
Mailing Address 2612 Sag Harbor Way		Amount of Each Receipt this Period 75.00
City The Villages	State FL	
Zip Code 32162		Aggregate Year-to-Date ▼ 750.00
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) ▼

Full Name (Last, First, Middle Initial) C. Ms. Jean B. Montague		Date of Receipt 12 / 17 / 2014 Transaction ID : 4237755
Mailing Address 162 Walnut Ct		Amount of Each Receipt this Period 20.00
City Santa Rosa	State CA	
Zip Code 95404		Aggregate Year-to-Date ▼ 240.00
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 1136 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Maxine P. Montgomery		Date of Receipt
Mailing Address 7 Charen Court		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Potomac	MD	20854
FEC ID number of contributing federal political committee.		Transaction ID : 4227686
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Guy B Moody		Date of Receipt
Mailing Address 9506 Red Apple Lane		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Columbia	MD	21046
FEC ID number of contributing federal political committee.		Transaction ID : 4228037
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="265.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. James Moody		Date of Receipt
Mailing Address 6514 Crimson		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Fort Smith	AR	72903
FEC ID number of contributing federal political committee.		Transaction ID : 4232174
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="245.00"/>
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: (check only one)	PAGE 1137 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Cristina Moody

Mailing Address 73 Pier Dr Apt 102

City Westmont State IL Zip Code 60559

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Purdue University Graduate Research Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **343.00**

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231701

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
B. Mary B. Moon

Mailing Address 424 Manitou Place

City South Bend State IN Zip Code 46616

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238783

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Ms. Deborah Goldshine Moore

Mailing Address 4610 Spalding Drive

City Dumfries State VA Zip Code 22025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Buchanan Ingersoll & Rooney, Pc Law Firm Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
12 / 02 / 2014
Transaction ID : 4231373

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... **60.00**

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 1138 OF 2648
	<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)
EMILY's List

A. Ms. Gayle I. Moore
Full Name (Last, First, Middle Initial)
Mailing Address 3115 Mauricia Ave.
City Santa Clara State CA Zip Code 95051
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.14

Date of Receipt 12 / 29 / 2014
Transaction ID : 4242579
Amount of Each Receipt this Period 40.00

B. Mrs. Judith W Moore
Full Name (Last, First, Middle Initial)
Mailing Address 273 Kite Lake Road
City Fayetteville State GA Zip Code 30214
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt 12 / 11 / 2014
Transaction ID : 4235001
Amount of Each Receipt this Period 10.00

C. Mrs. Judith W Moore
Full Name (Last, First, Middle Initial)
Mailing Address 273 Kite Lake Road
City Fayetteville State GA Zip Code 30214
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.16

Date of Receipt 12 / 12 / 2014
Transaction ID : 4235790
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 1139 OF 2648
	<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)
EMILY's List

A. Mrs. Judith W Moore
Full Name (Last, First, Middle Initial)
Mailing Address 273 Kite Lake Road

City Fayetteville	State GA	Zip Code 30214
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	27	/	2014

Transaction ID : 4228398

Amount of Each Receipt this Period
100.00

B. Ms. Constance C. Moore
Full Name (Last, First, Middle Initial)
Mailing Address 419 s. Camac St.

City Philadelphia	State PA	Zip Code 19147
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	29	/	2014

Transaction ID : 4242837

Amount of Each Receipt this Period
35.00

C. Ms. Peggy B. Moore
Full Name (Last, First, Middle Initial)
Mailing Address 2752 Oakleigh Ct

City Tallahassee	State FL	Zip Code 32312
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation 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
11	/	26	/	2014

Transaction ID : 4228038

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 1140 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Frances C. Moore		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 18 / 2014 Transaction ID : 4238108
Mailing Address 2511 Lynnwood Dr		Amount of Each Receipt this Period 35.00
City Bellevue	State NE	Zip Code 68123
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

Full Name (Last, First, Middle Initial) B. Ms. Barbara D. Moore		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230655
Mailing Address 83 Via Descanso		Amount of Each Receipt this Period 150.00
City Monterey	State CA	Zip Code 93940
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) C. Ms. N. Moore		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4232970
Mailing Address 67071 39th St.		Amount of Each Receipt this Period 50.00
City Paw Paw	State MI	Zip Code 49079
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
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 ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	235.00
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 1141 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Diane W. Moore		Date of Receipt										
Mailing Address 815 Rice St		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>01</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	12		01		2014
M M M	/	D D D	/	Y Y Y Y Y								
12		01		2014								
City	State	Zip Code										
Highland Park	IL	60035										
FEC ID number of contributing federal political committee.		Transaction ID : 4230654										
<input type="checkbox"/> C		Amount of Each Receipt this Period										
		<table border="1"> <tr> <td>300.00</td> </tr> </table>	300.00									
300.00												
Name of Employer	Occupation											
None	Retired											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td>300.00</td> </tr> </table>	300.00										
300.00												

Full Name (Last, First, Middle Initial) B. Ms. Barbara A. Moore		Date of Receipt										
Mailing Address 270 Harrison Ave., #307 #307		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	12		30		2014
M M M	/	D D D	/	Y Y Y Y Y								
12		30		2014								
City	State	Zip Code										
Jersey City	NJ	07304										
FEC ID number of contributing federal political committee.		Transaction ID : 4242945										
<input type="checkbox"/> C		Amount of Each Receipt this Period										
		<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00									
250.00												
Name of Employer	Occupation											
Nteu	Attorney											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00										
250.00												

Full Name (Last, First, Middle Initial) C. Ms. Linda Moore		Date of Receipt										
Mailing Address 107 Penn St		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>03</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	12		03		2014
M M M	/	D D D	/	Y Y Y Y Y								
12		03		2014								
City	State	Zip Code										
Riverton	NJ	08077										
FEC ID number of contributing federal political committee.		Transaction ID : 4231927										
<input type="checkbox"/> C		Amount of Each Receipt this Period										
		<table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00									
25.00												
Name of Employer	Occupation											
Standard Insurance Co	Service Delivery Mgr											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td>900.00</td> </tr> </table>	900.00										
900.00												

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>325.00</td> </tr> </table>	325.00
325.00		
TOTAL This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

**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 1142 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda Moore			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229097
Mailing Address 107 Penn St			Amount of Each Receipt this Period 50.00
City Riverton	State NJ	Zip Code 08077	
FEC ID number of contributing federal political committee. C			
Name of Employer Standard Insurance Co	Occupation Service Delivery Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) B. Ms. Linda Moore			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242225
Mailing Address 107 Penn St			Amount of Each Receipt this Period 50.00
City Riverton	State NJ	Zip Code 08077	
FEC ID number of contributing federal political committee. C			
Name of Employer Standard Insurance Co	Occupation Service Delivery Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) C. Ms. Rebecca Moore			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229096
Mailing Address 1570 Wilbur Drive NE			Amount of Each Receipt this Period 20.00
City North Canton	State OH	Zip Code 44720	
FEC ID number of contributing federal political committee. C			
Name of Employer Requested	Occupation Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 1144 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Diana L Morabito		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4244822
Mailing Address 1976 Abinante Lane		Amount of Each Receipt this Period 30.00
City San Jose	State CA	Zip Code 95124
FEC ID number of contributing federal political committee. C		
Name of Employer Adaptive Insights	Occupation Software Engineered	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

Full Name (Last, First, Middle Initial) B. Ms. Diana L Morabito		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237141
Mailing Address 1976 Abinante Lane		Amount of Each Receipt this Period 50.00
City San Jose	State CA	Zip Code 95124
FEC ID number of contributing federal political committee. C		
Name of Employer Adaptive Insights	Occupation Software Engineered	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

Full Name (Last, First, Middle Initial) C. Dr. Page S. Morahan		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4235156
Mailing Address 735 Fetters Mill Rd		Amount of Each Receipt this Period 100.00
City Huntingdon Valley	State PA	Zip Code 19006
FEC ID number of contributing federal political committee. C		
Name of Employer Drexel	Occupation Educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 1145 OF 2648
	<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)
EMILY's List

A. Ms. Myra Morewitz
Full Name (Last, First, Middle Initial)
Mailing Address 5300 Bothwell RD
City Tarzana State CA Zip Code 91356
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233070
Amount of Each Receipt this Period
100.00

B. Ms. Gloria Morgan
Full Name (Last, First, Middle Initial)
Mailing Address 2449 Morning Star Trail
City Green Bay State WI Zip Code 54302
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt
12 / 04 / 2014
Transaction ID : 4232279
Amount of Each Receipt this Period
75.00

C. Ms. Bonnie Morgan
Full Name (Last, First, Middle Initial)
Mailing Address 2211 W. Rogers Ave, #237
City Baltimore State MD Zip Code 21209
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 715.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232618
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 1146 OF 2648
	<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)
EMILY's List

A. Ms. Bonnie Morgan
Full Name (Last, First, Middle Initial)
Mailing Address 2211 W. Rogers Ave, #237

City Baltimore	State MD	Zip Code 21209
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 715.00	

Date of Receipt
12 / 23 / 2014
Transaction ID : 4240020

Amount of Each Receipt this Period
100.00

B. Yvonne Morgan
Full Name (Last, First, Middle Initial)
Mailing Address 5009 Charter Oak Drive

City Temple	State TX	Zip Code 76502
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231739

Amount of Each Receipt this Period
100.00

C. Dr. Elisabeth Morgan
Full Name (Last, First, Middle Initial)
Mailing Address 3410 Lowell Street NW

City Washinagton	State DC	Zip Code 20016
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 ▼ 240.00	

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236716

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	220.00
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 1147 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Martha Morgan

Mailing Address PO Box 114

City Browning State MT Zip Code 59417

FEC ID number of contributing federal political committee. **C**

Name of Employer Taos Professional Services Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2014

Transaction ID : 4236397

Amount of Each Receipt this Period
113.00

Full Name (Last, First, Middle Initial)
B. Mrs. Shanny Morgenstern

Mailing Address 12307 Flint Street

City Overland Park State KS Zip Code 66213

FEC ID number of contributing federal political committee. **C**

Name of Employer Morningstar Communications Occupation Public Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014

Transaction ID : 4238788

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Mrs. Shanny Morgenstern

Mailing Address 12307 Flint Street

City Overland Park State KS Zip Code 66213

FEC ID number of contributing federal political committee. **C**

Name of Employer Morningstar Communications Occupation Public Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2014

Transaction ID : 4239286

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **133.00**

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 1148 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jean M. Morris
 Full Name (Last, First, Middle Initial)
 Mailing Address 1610 12th Ave. West
 City Seattle State WA Zip Code 98119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Adventure Divas, Inc. Occupation Executive Producer/Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237788
 Amount of Each Receipt this Period
 50.00

B. Ms. Cynthia S. Morris
 Full Name (Last, First, Middle Initial)
 Mailing Address 11125 117th St.
 City Largo State FL Zip Code 33778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Cpa
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242434
 Amount of Each Receipt this Period
 200.00

C. Ms. Sherilyn Morrison
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 2882
 City Wailuku State HI Zip Code 96793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237262
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 1149 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Mary Louise Morrison			Date of Receipt
Mailing Address 525 Moraga Ave.			<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4238117
Piedmont	CA	94611	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
None	None		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="770.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Anita Morrison			Date of Receipt
Mailing Address 9318 Worth Avenue			<input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4236313
Silver Spring	MD	20901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
Partners For Economic Solutions	Consultant		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Mary F. Morrison			Date of Receipt
Mailing Address 466 Ballytore Rd.			<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4230656
Wynnewood	PA	19096	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
Temple University	Physician		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="375.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1151 OF 2648
	<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)
EMILY's List

A. Horace L. Morrow
Full Name (Last, First, Middle Initial)
Mailing Address 8502 Andreas Cove
City Austin State TX Zip Code 78759
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 **650.00**

Date of Receipt
12 / 02 / 2014
Transaction ID : 4231139
Amount of Each Receipt this Period
100.00

B. Jane Morse
Full Name (Last, First, Middle Initial)
Mailing Address 224 Woodbine
City Terre Haute State IN Zip Code 47803
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230658
Amount of Each Receipt this Period
100.00

C. Evelyn Morton
Full Name (Last, First, Middle Initial)
Mailing Address 12602 S Villa Ave
City Oklahoma City State OK Zip Code 73170
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Broadcast Owner
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231894
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... **250.00**
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 1152 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. John Morton		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 2036 Allen Place		Transaction ID : 4243378
City Washington	State DC	Zip Code 20009
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Opic	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Paul E. Moslander		Date of Receipt M M / D D / Y Y Y Y 12 / 29 / 2014
Mailing Address 1895 Jackson St Apt 401		Transaction ID : 4242447
City San Francisco	State CA	Zip Code 94109
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Marian M. Moss		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2014
Mailing Address 5328 Siesta Court		Transaction ID : 4238789
City Sarasota	State FL	Zip Code 34242
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer C.O.M. of Sarasota, Inc.	Occupation Property Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional).....▶	500.00
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 1153 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Leora Mosston
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 Froswick Ave
 City South Portland State ME Zip Code 04106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 12 / 2014
Transaction ID : 4235778
 Amount of Each Receipt this Period
 50.00

B. Dan Mouer
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 W 30th St
 City Richmond State VA Zip Code 23225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation 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
 12 / 13 / 2014
Transaction ID : 4236132
 Amount of Each Receipt this Period
 25.00

C. Ms. Martha Mountain
 Full Name (Last, First, Middle Initial)
 Mailing Address 1444 Church St NW #401
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Scenic Artists, Local Usa 829 I Occupation Business Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234539
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 1154 OF 2648
	<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)
EMILY's List

A. Ms. Judith C. Mower
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 W. Jefferson St., Apt. 405
 City Syracuse State NY Zip Code 13202
 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 ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4231140
 Amount of Each Receipt this Period
 500.00

B. Mr. Donald R. Moy
 Full Name (Last, First, Middle Initial)
 Mailing Address 79 Irving Ave.
 City Floral Park State NY Zip Code 11001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kern Augustine Conroy & Schoppman P.C. Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230659
 Amount of Each Receipt this Period
 200.00

C. Ms. Kathryn Mudge
 Full Name (Last, First, Middle Initial)
 Mailing Address 4426 Q St. NW
 City Washington State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ndi Occupation Program Officer
 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
 12 / 31 / 2014
Transaction ID : 4243213
 Amount of Each Receipt this Period
 150.00

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 1155 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert Stephen Mudgett		Date of Receipt
Mailing Address 21 Polpis Ln		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
Guilford	CT	06437
FEC ID number of contributing federal political committee.		Transaction ID : 4240023
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="305.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="305.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Anne Mudgett		Date of Receipt
Mailing Address 15376 Pauma Valley Dr..		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Pauma Valley	CA	92061
FEC ID number of contributing federal political committee.		Transaction ID : 4234553
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Gregory Mueller		Date of Receipt
Mailing Address 91-573 Pupu St		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Ewa Beach	HI	96706
FEC ID number of contributing federal political committee.		Transaction ID : 4238791
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="206.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="206.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1156 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Nancy Mugridge		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 27 / 2014 Transaction ID : 4228367
Mailing Address 3705 Holden Circle		Amount of Each Receipt this Period 25.00
City Los Alamitos	State CA	Zip Code 90720
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 275.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. Nancy Mugridge		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2014 Transaction ID : 4240986
Mailing Address 3705 Holden Circle		Amount of Each Receipt this Period 25.00
City Los Alamitos	State CA	Zip Code 90720
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 275.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. Ms. Chandra Mukerji		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232755
Mailing Address 1410 Luneta Drive		Amount of Each Receipt this Period 100.00
City Del Mar	State CA	Zip Code 92014
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1800.00
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 ▼ 1800.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1157 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Elizabeth Mullane		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229108
Mailing Address 18 Cady Ave		Amount of Each Receipt this Period 100.00
City Somerville	State MA	Zip Code 02144
FEC ID number of contributing federal political committee. C	Name of Employer Ccs Fundraising, Inc	Occupation Fundraiser
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) B. Elizabeth Mullane		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242232
Mailing Address 18 Cady Ave		Amount of Each Receipt this Period 100.00
City Somerville	State MA	Zip Code 02144
FEC ID number of contributing federal political committee. C	Name of Employer Ccs Fundraising, Inc	Occupation Fundraiser
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. Marylou Mullen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238792
Mailing Address 24 Dunkirk Rd		Amount of Each Receipt this Period 25.00
City Baltimore	State MD	Zip Code 21212
FEC ID number of contributing federal political committee. C	Name of Employer Lifebridge Health	Occupation Research Nurse
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 1158 OF 2648
	<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)
EMILY's List

A. Mr. Mrs. Burton H. Muller
Full Name (Last, First, Middle Initial)

Mailing Address 508 S. 19th St.

City Laramie State WY Zip Code 82070

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 ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : 4230661

Amount of Each Receipt this Period
150.00

B. Carol Mulrooney
Full Name (Last, First, Middle Initial)

Mailing Address 3068 Trimble Cir. NW

City Concord State NC Zip Code 28027

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **295.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014

Transaction ID : 4240898

Amount of Each Receipt this Period
35.00

C. Carol Mulrooney
Full Name (Last, First, Middle Initial)

Mailing Address 3068 Trimble Cir. NW

City Concord State NC Zip Code 28027

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **295.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014

Transaction ID : 4228045

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **235.00**

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 1159 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Joyce Mulvaney
 Full Name (Last, First, Middle Initial)
 Mailing Address 1657 Woods Ln
 City Centralia State IL Zip Code 62801
 Date of Receipt: 12 / 03 / 2014
Transaction ID : 4231972
 Amount of Each Receipt this Period: 25.00
 Aggregate Year-to-Date: 295.00
 Name of Employer: None Occupation: Retired
 Receipt For: Primary General Other (specify)

B. Timothy Munsey
 Full Name (Last, First, Middle Initial)
 Mailing Address 613 Neal Street
 City Parkersburg State WV Zip Code 26101
 Date of Receipt: 11 / 28 / 2014
Transaction ID : 4229109
 Amount of Each Receipt this Period: 20.00
 Aggregate Year-to-Date: 240.00
 Name of Employer: None Occupation: Retired
 Receipt For: Primary General Other (specify)

C. Timothy Munsey
 Full Name (Last, First, Middle Initial)
 Mailing Address 613 Neal Street
 City Parkersburg State WV Zip Code 26101
 Date of Receipt: 12 / 28 / 2014
Transaction ID : 4241304
 Amount of Each Receipt this Period: 20.00
 Aggregate Year-to-Date: 240.00
 Name of Employer: None Occupation: Retired
 Receipt For: Primary General Other (specify)

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 1160 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Geraldine Murano		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229110
Mailing Address 8080 E Speedway Blvd Unit 409		Amount of Each Receipt this Period 10.00
City Tucson State AZ Zip Code 85710	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 ▼ 315.00	

Full Name (Last, First, Middle Initial) B. Geraldine Murano		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229111
Mailing Address 8080 E Speedway Blvd Unit 409		Amount of Each Receipt this Period 10.00
City Tucson State AZ Zip Code 85710	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 ▼ 315.00	

Full Name (Last, First, Middle Initial) C. Geraldine Murano		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242233
Mailing Address 8080 E Speedway Blvd Unit 409		Amount of Each Receipt this Period 10.00
City Tucson State AZ Zip Code 85710	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 ▼ 315.00	

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 1161 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Geraldine Murano		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242234
Mailing Address 8080 E Speedway Blvd Unit 409		Amount of Each Receipt this Period 10.00
City Tucson	State AZ	Zip Code 85710
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 ▼ 315.00	

Full Name (Last, First, Middle Initial) B. Mr. Mike Murdock		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233726
Mailing Address 459 Leigh Ave.		Amount of Each Receipt this Period 25.00
City San Jose	State CA	Zip Code 95128
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Ms. Beatrice Murgio		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237733
Mailing Address PO Box 2457		Amount of Each Receipt this Period 30.00
City New Preston	State CT	Zip Code 06777
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 1162 OF 2648
	<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)
EMILY's List

A. Ms. Mary R. Murnik
Full Name (Last, First, Middle Initial)
Mailing Address 331 W Slosson Ave.
City Reed City State MI Zip Code 49677
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 ▼ 400.00

Date of Receipt 12 / 01 / 2014
Transaction ID : 4230662
Amount of Each Receipt this Period 50.00

B. Sarah V. Murphree
Full Name (Last, First, Middle Initial)
Mailing Address 3900 Rose Hill Ave.
City Cincinnati State OH Zip Code 45229
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Artist Retired From Day Job
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 740.00

Date of Receipt 12 / 20 / 2014
Transaction ID : 4239333
Amount of Each Receipt this Period 10.00

C. Sarah V. Murphree
Full Name (Last, First, Middle Initial)
Mailing Address 3900 Rose Hill Ave.
City Cincinnati State OH Zip Code 45229
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Artist Retired From Day Job
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 740.00

Date of Receipt 12 / 23 / 2014
Transaction ID : 4240027
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 1163 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Sarah V. Murphree
 Full Name (Last, First, Middle Initial)
 Mailing Address 3900 Rose Hill Ave.
 City Cincinnati State OH Zip Code 45229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Artist Retired From Day Job
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt
 11 / 25 / 2014
Transaction ID : 4230122
 Amount of Each Receipt this Period
 25.00

B. Sarah V. Murphree
 Full Name (Last, First, Middle Initial)
 Mailing Address 3900 Rose Hill Ave.
 City Cincinnati State OH Zip Code 45229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Artist Retired From Day Job
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt
 12 / 23 / 2014
Transaction ID : 4240026
 Amount of Each Receipt this Period
 25.00

C. Ms. Katherine E Murphy
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 Powder Mill Rd
 City Framingham State MA Zip Code 01701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bwh Occupation Rn
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 12 / 23 / 2014
Transaction ID : 4240029
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 1164 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Maureen Murphy

Mailing Address 30 Charter St Unit 16

City Exeter	State NH	Zip Code 03833
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Etain Consulting Inc	Occupation Software Consultant
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.16**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2014

Transaction ID : 4233612

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)
B. Ms. Lucinda R. Murphy

Mailing Address 3206 Batavia Ave

City Baltimore	State MD	Zip Code 21214
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4240028

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)
C. Ms. Lucinda R. Murphy

Mailing Address 3206 Batavia Ave

City Baltimore	State MD	Zip Code 21214
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4229114

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....▶	25.00
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 1165 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lucinda R. Murphy		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241528
Mailing Address 3206 Batavia Ave		Amount of Each Receipt this Period 10.00
City Baltimore	State MD	Zip Code 21214
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) B. Ms. Lucinda R. Murphy		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237280
Mailing Address 3206 Batavia Ave		Amount of Each Receipt this Period 15.00
City Baltimore	State MD	Zip Code 21214
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) C. William Murphy		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232170
Mailing Address PO Box 51		Amount of Each Receipt this Period 25.00
City Grantsboro	State NC	Zip Code 28529
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 ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 1166 OF 2648
	<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)
EMILY's List

A. Daniel Murphy
Full Name (Last, First, Middle Initial)
Mailing Address 1433 N.W. 77th St.
City Redmond State OR Zip Code 97756
FEC ID number of contributing federal political committee. **C**
Name of Employer St. Charles Health Care Occupation Physician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **315.00**

Date of Receipt **12 / 31 / 2014**
Transaction ID : 4243220
Amount of Each Receipt this Period **200.00**

B. Kathleen Murray
Full Name (Last, First, Middle Initial)
Mailing Address 30 Allston Way
City San Francisco State CA Zip Code 94127
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **475.00**

Date of Receipt **12 / 19 / 2014**
Transaction ID : 4238795
Amount of Each Receipt this Period **50.00**

C. Ms. Gail Murray
Full Name (Last, First, Middle Initial)
Mailing Address 3535 Cassena Dr.
City Walnut Creek State CA Zip Code 94598
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 16 / 2014**
Transaction ID : 4237015
Amount of Each Receipt this Period **300.00**

SUBTOTAL of Receipts This Page (optional)..... **370.00**
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 1167 OF 2648
	<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)
EMILY's List

A. Ms. Barbara M. Murray
Full Name (Last, First, Middle Initial)

Mailing Address 933 College Ave

City Redlands State CA Zip Code 92374

FEC ID number of contributing federal political committee. **C**

Name of Employer University Of Redlands Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4229118

Amount of Each Receipt this Period
15.00

B. Ms. Lissa Muscatine
Full Name (Last, First, Middle Initial)

Mailing Address 7020 Glenbrook Road

City Bethesda State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C**

Name of Employer Politics And Prose Bookstore Occupation Business Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4227392

Amount of Each Receipt this Period
1200.00

C. Ms. Mary Anne Mushatt
Full Name (Last, First, Middle Initial)

Mailing Address 6030 S Robertson St

City New Orleans State LA Zip Code 70118

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Writer

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
 12 / 31 / 2014

Transaction ID : 4243287

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	1265.00
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 1168 OF 2648
	<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)
EMILY's List

A. Ms. Mary Anne Mushatt
Full Name (Last, First, Middle Initial)

Mailing Address 6030 S Robertson St

City New Orleans State LA Zip Code 70118

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Writer

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
 12 / 11 / 2014

Transaction ID : 4234712

Amount of Each Receipt this Period
100.00

B. Ms. Kathryn Myatt
Full Name (Last, First, Middle Initial)

Mailing Address 4004 Peninsula Club Circle

City Fort Worth State TX Zip Code 76135

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : 4238796

Amount of Each Receipt this Period
15.00

C. Ms. Dee Dee Myers
Full Name (Last, First, Middle Initial)

Mailing Address 5146 Klinge St. NW

City Washington State DC Zip Code 20016

FEC ID number of contributing federal political committee. **C**

Name of Employer The Glover Park Group Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237790

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **165.00**

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 1169 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Charles Myers
 Full Name (Last, First, Middle Initial)
 Mailing Address 3205 Locksley Court
 City Modesto State CA Zip Code 95350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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
 12 / 15 / 2014
Transaction ID : 4236556
 Amount of Each Receipt this Period
 100.00

B. Edie Nadelhaft
 Full Name (Last, First, Middle Initial)
 Mailing Address 161 Edridge Street Apt3
 City New York State NY Zip Code 10002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 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
 12 / 08 / 2014
Transaction ID : 4233678
 Amount of Each Receipt this Period
 25.00

C. Adair Nagata
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 W 71st St, 4g
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Contract Teacher Occupation Semi-Retired Professor
 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
 12 / 17 / 2014
Transaction ID : 4237769
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 1170 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mitsugi Nakashima
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 612
 City Kalaheo State HI Zip Code 96741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238799
 Amount of Each Receipt this Period
 50.00

B. Sarah Nanus
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 Serpentine Road
 City Tenafly State NJ Zip Code 07670
 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 ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231377
 Amount of Each Receipt this Period
 500.00

C. Ms. Janet Napolitano
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 Lakeshore Avenue
 City Oakland State CA Zip Code 94606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Univ. Of California President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231142
 Amount of Each Receipt this Period
 1200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
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 1171 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Leslie Nathanson Juris		Date of Receipt M M / D D / Y Y Y Y Y 12 / 08 / 2014
Mailing Address 4 Thorpe Way		Transaction ID : 4233058
City Santa Fe	State NM	Zip Code 87506
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 75.00	
Name of Employer Self Employed	Occupation Professor, Consultan	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Elias Natsiopoulos		Date of Receipt M M / D D / Y Y Y Y Y 11 / 28 / 2014
Mailing Address 416 Renton Ave S		Transaction ID : 4229122
City Renton	State WA	Zip Code 98057
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1155.00	

Full Name (Last, First, Middle Initial) C. Elias Natsiopoulos		Date of Receipt M M / D D / Y Y Y Y Y 12 / 28 / 2014
Mailing Address 416 Renton Ave S		Transaction ID : 4241529
City Renton	State WA	Zip Code 98057
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1155.00	

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 1172 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Elias Natsiopoulos
 Full Name (Last, First, Middle Initial)
 Mailing Address 416 Renton Ave S
 City Renton State WA Zip Code 98057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234949
 Amount of Each Receipt this Period
 100.00

B. Ms. Mary Naughton
 Full Name (Last, First, Middle Initial)
 Mailing Address 1325 Peachtree St. NE #901
 City Atlanta State GA Zip Code 30309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232855
 Amount of Each Receipt this Period
 34.00

C. Ms. Darlene Navis
 Full Name (Last, First, Middle Initial)
 Mailing Address 1048 Janewood Ln.
 City Sheboygan State WI Zip Code 53081
 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 ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234651
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 234.00
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 1173 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jacy Needles		Date of Receipt 12 / 06 / 2014 Transaction ID : 4232531
Mailing Address 10 Inwood Ln.		Amount of Each Receipt this Period 15.00
City Farmington	State CT	Zip Code 06032
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 ▼ 315.00	

Full Name (Last, First, Middle Initial) B. Ms. Ruth Havighurst Neff		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233091
Mailing Address 1045 4th St		Amount of Each Receipt this Period 100.00
City Whitefish	State MT	Zip Code 59937
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 ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary Neill		Date of Receipt 12 / 11 / 2014 Transaction ID : 4235033
Mailing Address 2618 Starlight Ct		Amount of Each Receipt this Period 25.00
City San Antonio	State TX	Zip Code 78261
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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 1174 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Connie L. Neish		Date of Receipt										
Mailing Address 82-5821 Napoopoo Rd.		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	12		23		2014
M M M	/	D D D	/	Y Y Y Y Y								
12		23		2014								
City State Zip Code Captain Cook HI 96704		Transaction ID : 4239678										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer Occupation Self Employed Florist		<table border="1"> <tr> <td>200.00</td> </tr> </table>	200.00									
200.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00										
500.00												

Full Name (Last, First, Middle Initial) B. Ms. Marjorie Neiswanger		Date of Receipt										
Mailing Address 2590 Pecho Valley Rd		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	12		10		2014
M M M	/	D D D	/	Y Y Y Y Y								
12		10		2014								
City State Zip Code Los Osos CA 93402		Transaction ID : 4234396										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer Occupation Requested Requested		<table border="1"> <tr> <td>200.00</td> </tr> </table>	200.00									
200.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>402.00</td> </tr> </table>	402.00										
402.00												

Full Name (Last, First, Middle Initial) C. Kathryn Nelson		Date of Receipt										
Mailing Address 1823 Roscomare Rd		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	12		19		2014
M M M	/	D D D	/	Y Y Y Y Y								
12		19		2014								
City State Zip Code Los Angeles CA 90077		Transaction ID : 4238802										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer Occupation N/A Tv Executive		<table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00									
25.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>300.00</td> </tr> </table>	300.00										
300.00												

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>425.00</td> </tr> </table>	425.00
425.00		
TOTAL This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

**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 1175 OF 2648
	<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

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda Gay Nelson		Date of Receipt
Mailing Address 914 Fairgreen Rd		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Greensboro	State NC	Zip Code 27410
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4228050
Name of Employer: None		Amount of Each Receipt this Period
Occupation: None		<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Nicola A. Nelson		Date of Receipt
Mailing Address 90 W. 500 S. # 242		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City Bountiful	State UT	Zip Code 84010
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4237744
Name of Employer: None		Amount of Each Receipt this Period
Occupation: None		<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="290.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Constance D. Nelson		Date of Receipt
Mailing Address 6226 20th Ave. N.E.		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City Seattle	State WA	Zip Code 98115
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4238801
Name of Employer: None		Amount of Each Receipt this Period
Occupation: None		<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="285.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1176 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Claire E Nelson

Mailing Address 4259 Emory Way

City Livermore State CA Zip Code 94550

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 ▼ **555.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014

Transaction ID : **4240032**

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
B. Ms. Patricia A. Nelson

Mailing Address 4835 Dominica Way W.

City Apple Valley State MN Zip Code 55124

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 ▼ **216.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : **4238208**

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Ms. Barbara Nelson

Mailing Address 16153 W Starlight Dr

City Surprise State AZ Zip Code 85374

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 ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : **4229125**

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **65.00**

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 1177 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Barbara Nelson

Mailing Address 16153 W Starlight Dr

City Surprise State AZ Zip Code 85374

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 ▼
220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4242241

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Ms. Anabel Nelson

Mailing Address 311 South St Apt 109

City Redding State CA Zip Code 96001

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 ▼
228.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2014
Transaction ID : 4228315

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Ms. Anabel Nelson

Mailing Address 311 South St Apt 109

City Redding State CA Zip Code 96001

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 ▼
228.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2014
Transaction ID : 4241161

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00

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 1178 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Nancy J. Nelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3041 Sedgwick St. N.W., Apt. 103
 City Washington State DC Zip Code 20008
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232198
 Amount of Each Receipt this Period
 500.00

B. Mr. Paul Nelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Tall Tree Way
 City Georgetown State MA Zip Code 01833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228343
 Amount of Each Receipt this Period
 25.00

C. Mr. Paul Nelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Tall Tree Way
 City Georgetown State MA Zip Code 01833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241180
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 1179 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Sherwood Nelson

Mailing Address 8201 6th Ave. Apt 146

City Tacoma	State WA	Zip Code 98406
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	13	/	2014

Transaction ID : 4244762

Amount of Each Receipt this Period
17.00

Full Name (Last, First, Middle Initial)
B. Gaye Nelson

Mailing Address 4570 Van Nuys Blvd. #269

City Van Nuys	State CA	Zip Code 91403
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Astrologer
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4240033

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Ms. Phyllis Nelson

Mailing Address P.O. Box 160097

City Austin	State TX	Zip Code 78716
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Clinical Social Work
-----------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	26	/	2014

Transaction ID : 4228049

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	67.00
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 1181 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Iris D. Nelson-Schwartz
 Full Name (Last, First, Middle Initial)
 Mailing Address 185 W End Ave., Apt. 8H
 City New York State NY Zip Code 10023
 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 ▼ 263.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4231144
 Amount of Each Receipt this Period
 75.00

B. Allen Nesbitt
 Full Name (Last, First, Middle Initial)
 Mailing Address 2120 L St. N.W., Suite 305
 City Washington State DC Zip Code 20037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nesbitt Research Occupation Research
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233670
 Amount of Each Receipt this Period
 25.00

C. Allen Nesbitt
 Full Name (Last, First, Middle Initial)
 Mailing Address 2120 L St. N.W., Suite 305
 City Washington State DC Zip Code 20037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nesbitt Research Occupation Research
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234867
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 1182 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cheryl Nesler		Date of Receipt MM / DD / YYYY 11 / 28 / 2014 Transaction ID : 4229128
Mailing Address 68-1025 N Kaniku Dr Apt 619		Amount of Each Receipt this Period 35.00
City Kamuela	State HI	Zip Code 96743
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 2045.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Cheryl Nesler		Date of Receipt MM / DD / YYYY 11 / 28 / 2014 Transaction ID : 4229129
Mailing Address 68-1025 N Kaniku Dr Apt 619		Amount of Each Receipt this Period 50.00
City Kamuela	State HI	Zip Code 96743
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 2045.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Cheryl Nesler		Date of Receipt MM / DD / YYYY 12 / 28 / 2014 Transaction ID : 4241531
Mailing Address 68-1025 N Kaniku Dr Apt 619		Amount of Each Receipt this Period 60.00
City Kamuela	State HI	Zip Code 96743
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 2045.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 1183 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Cheryl Nesler
 Full Name (Last, First, Middle Initial)
 Mailing Address 68-1025 N Kaniku Dr Apt 619

City Kamuela	State HI	Zip Code 96743
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2045.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229130

Amount of Each Receipt this Period
 100.00

B. Mr. Ben Neufeld
 Full Name (Last, First, Middle Initial)
 Mailing Address 2008 Linda Flora Drive

City Los Angeles	State CA	Zip Code 90077
---------------------	-------------	-------------------

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
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232338

Amount of Each Receipt this Period
 150.00

C. Alfred Neumann
 Full Name (Last, First, Middle Initial)
 Mailing Address 520 20th St.

City Santa Monica	State CA	Zip Code 90025
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231613

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	260.00
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 1184 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Muriel Neve
Full Name (Last, First, Middle Initial)
Mailing Address 805 N 22nd St Apt 1c

City Blair	State NE	Zip Code 68008
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	02	/	2014

Transaction ID : 4231145

Amount of Each Receipt this Period

200.00

B. Ms. Susan Nevens
Full Name (Last, First, Middle Initial)
Mailing Address 17039 Embassy Dr.

City Encino	State CA	Zip Code 91316
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FEC ID number of contributing federal political committee. **C**

Name of Employer Jomar Inc.	Occupation Manufacturer Table Linens
--------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230671

Amount of Each Receipt this Period

50.00

C. Dorothy D. Nevill
Full Name (Last, First, Middle Initial)
Mailing Address 2320 NW 24th Terrace

City Gainesville	State FL	Zip Code 32605
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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 ▼ **520.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4240035

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 1185 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ellen Newbold		Date of Receipt
Mailing Address 542 Sheffield Road		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Rose Hill	NC	28458
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4229131
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Ellen Newbold		Date of Receipt
Mailing Address 542 Sheffield Road		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Rose Hill	NC	28458
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4242243
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Rebecca Newland		Date of Receipt
Mailing Address PO Box 160141		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Sacramento	CA	95816
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4230672
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1200.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="350.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1186 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Lyris J. Newman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2014 Transaction ID : 4244523
Mailing Address 3406 W Bay Vista Ave		Amount of Each Receipt this Period 1000.00
City Tampa	State FL	Zip Code 33611
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Sylvia Newman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4240036
Mailing Address P.O. Box 582		Amount of Each Receipt this Period 25.00
City Ashland	State VA	Zip Code 23005
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ezra Newman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2014 Transaction ID : 4235469
Mailing Address 220 N Dithridge St Apt 700		Amount of Each Receipt this Period 25.00
City Pittsburgh	State PA	Zip Code 15213
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 ▼ 375.00	

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 1187 OF 2648
	(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

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)
EMILY's List

A. Marc Newman
Full Name (Last, First, Middle Initial)

Mailing Address 27010 Grand Central Parkway 14-O

City Floral Park	State NY	Zip Code 11005
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Standard Refrigerators, Inc.	Occupation President/Owner
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	02	/	2014

Transaction ID : 4231380

Amount of Each Receipt this Period
50.00

B. Marc Newman
Full Name (Last, First, Middle Initial)

Mailing Address 27010 Grand Central Parkway 14-O

City Floral Park	State NY	Zip Code 11005
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Standard Refrigerators, Inc.	Occupation President/Owner
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	24	/	2014

Transaction ID : 4240285

Amount of Each Receipt this Period
100.00

C. Mr. Jerome P. Newmark
Full Name (Last, First, Middle Initial)

Mailing Address 604 19th St. E

City Jasper	State AL	Zip Code 35501
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
-------------------------------	-------------------------

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
12	/	01	/	2014

Transaction ID : 4230674

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 1188 OF 2648
	<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)
EMILY's List

A. Mrs. Hester Newton
Full Name (Last, First, Middle Initial)
Mailing Address 1934 Seminole Rd
City Norton Shores State MI Zip Code 49441
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4229132
Amount of Each Receipt this Period
100.00

B. Mrs. Hester Newton
Full Name (Last, First, Middle Initial)
Mailing Address 1934 Seminole Rd
City Norton Shores State MI Zip Code 49441
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241532
Amount of Each Receipt this Period
100.00

C. Ms. Abby S. Newton
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 67
City Shokan State NY Zip Code 12481
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Musician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 02 / 2014
Transaction ID : 4231381
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 1189 OF 2648
	<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)
EMILY's List

A. Mary Ni
Full Name (Last, First, Middle Initial)
Mailing Address 18 Park Vale Avenue
City Allston State MA Zip Code 02134
FEC ID number of contributing federal political committee. **C**
Name of Employer Salem State University Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4230140
Amount of Each Receipt this Period 20.00

B. Mary Ni
Full Name (Last, First, Middle Initial)
Mailing Address 18 Park Vale Avenue
City Allston State MA Zip Code 02134
FEC ID number of contributing federal political committee. **C**
Name of Employer Salem State University Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 26 / 2014
Transaction ID : 4240785
Amount of Each Receipt this Period 20.00

C. Mrs. Karen Nibbelink Nibbelink Lundy
Full Name (Last, First, Middle Initial)
Mailing Address 6306 35th St. N.
City Arlington State VA Zip Code 22213
FEC ID number of contributing federal political committee. **C**
Name of Employer Verizon Occupation Financial Analyst
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00

Date of Receipt 12 / 08 / 2014
Transaction ID : 4233083
Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.00
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 1190 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Constance G. Nichols		Date of Receipt
Mailing Address 8 Laurel St.		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Paxton	MA	01612
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4231695
Name of Employer	Occupation	Amount of Each Receipt this Period
Umass Memorial Healthcare	Physician	<input type="text" value="350.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="420.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Mary M. Nickerson		Date of Receipt
Mailing Address 3481 East Finger Rock Rd		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
Tucson	AZ	85718
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4233713
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Sharon Y. Nickols		Date of Receipt
Mailing Address 7402 Courtside Dr.		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
Garland	TX	75044
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4232955
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="235.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1191 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Margaret Nielsen

Mailing Address 1209 Old Hickory Lane

City East Lansing State MI Zip Code 48823

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 ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237636

Amount of Each Receipt this Period
 10.00

Full Name (Last, First, Middle Initial)
B. Philippa Nigg

Mailing Address 11260 Donner Pass Rd, Pmb 120
Pmb 120

City Truckee State CA Zip Code 96161

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 ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4240038

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Mr. Keith E. Nighthenheler

Mailing Address 4235 W. County Road 300 S

City Greencastle State IN Zip Code 46135

FEC ID number of contributing federal political committee. **C**

Name of Employer DePauw University Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014

Transaction ID : 4231866

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 1192 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Evelyn Niles		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234108
Mailing Address 733 SE Country Ln		Amount of Each Receipt this Period 15.00
City Lees Summit	State MO	Zip Code 64063
FEC ID number of contributing federal political committee. C		
Name of Employer Spiral Pathways Ministry	Occupation Minister/Instructor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary Lee Nitschke		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233691
Mailing Address 2364 NW Northrup St		Amount of Each Receipt this Period 30.00
City Portland	State OR	Zip Code 97210
FEC ID number of contributing federal political committee. C		
Name of Employer Animal School Behavior Services	Occupation Caab	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name (Last, First, Middle Initial) C. Ms. Susan D. Noack		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234394
Mailing Address P.O. Box 28488		Amount of Each Receipt this Period 250.00
City Scottsdale	State AZ	Zip Code 85255
FEC ID number of contributing federal political committee. C		
Name of Employer lbn	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	295.00
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 1193 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Barry Noack
 Full Name (Last, First, Middle Initial)
 Mailing Address 24816 S Lakestar Dr
 City Sun Lakes State AZ Zip Code 85248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 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
 12 / 15 / 2014
Transaction ID : 4236448
 Amount of Each Receipt this Period
 150.00

B. Ms. Lela G. Noble
 Full Name (Last, First, Middle Initial)
 Mailing Address 23500 Cristo Rey Dr Unit 319e
 City Cupertino State CA Zip Code 95014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2014
Transaction ID : 4238138
 Amount of Each Receipt this Period
 1000.00

C. Ms. Glenda Noble
 Full Name (Last, First, Middle Initial)
 Mailing Address 336 W 5th St.
 City Waconia State MN Zip Code 55387
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240327
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
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 1194 OF 2648
	<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)
EMILY's List

A. Jay Nolan
Full Name (Last, First, Middle Initial)
Mailing Address 121 Onderdonk Ave
City Manhasset State NY Zip Code 11030
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
M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014
Transaction ID : 4237776
Amount of Each Receipt this Period
250.00

B. Dr. John F. Nolen
Full Name (Last, First, Middle Initial)
Mailing Address 2083 Renault Ln NE
City Atlanta State GA Zip Code 30345
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014
Transaction ID : 4230678
Amount of Each Receipt this Period
400.00

C. Kimberly Noles
Full Name (Last, First, Middle Initial)
Mailing Address 1733 Applewod Place NE
City Cedar Rapids State IA Zip Code 52402
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Disabled
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2014
Transaction ID : 4233342
Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional).....▶	430.00
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 1195 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Kimberly Noles
 Full Name (Last, First, Middle Initial)
 Mailing Address 1733 Applewod Place NE
 City Cedar Rapids State IA Zip Code 52402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Disabled
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240040
 Amount of Each Receipt this Period
 5.00

B. Kimberly Noles
 Full Name (Last, First, Middle Initial)
 Mailing Address 1733 Applewod Place NE
 City Cedar Rapids State IA Zip Code 52402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Disabled
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233343
 Amount of Each Receipt this Period
 10.00

C. Ms. Suzan Mauer Noonan
 Full Name (Last, First, Middle Initial)
 Mailing Address 3628 Carleton Avenue
 City Anchorage State AK Zip Code 99517
 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 ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4236018
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	35.00
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 1196 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Barbara G. Noparstak
 Full Name (Last, First, Middle Initial)
 Mailing Address 810 Green St.
 City East Palo Alto State CA Zip Code 94303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239572
 Amount of Each Receipt this Period
 100.00

B. Wies Norberg
 Full Name (Last, First, Middle Initial)
 Mailing Address Box 1147
 City Carmel State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wies Norberg Prop.Man. Occupation Property Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230679
 Amount of Each Receipt this Period
 25.00

C. Ms. Judith Nordberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 3963 Mount Albertine Ave
 City San Diego State CA Zip Code 92111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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
 12 / 01 / 2014
Transaction ID : 4230680
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
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 1197 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Linda Norelli

Mailing Address 7214 Marywood Cir

City State Zip Code
Austin TX 78723

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 ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234559

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Joann Norman

Mailing Address 2908 Bermuda Dr.

City State Zip Code
Jonesboro AR 72401

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 ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228055

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Joann Norman

Mailing Address 2908 Bermuda Dr.

City State Zip Code
Jonesboro AR 72401

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 ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240757

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00

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 1199 OF 2648
	<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	

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Gillian Norris-Szanto		Date of Receipt
Mailing Address 309 Orchard Way		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Wayne	PA	19087
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4228334
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="270.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Gillian Norris-Szanto		Date of Receipt
Mailing Address 309 Orchard Way		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Wayne	PA	19087
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4241172
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="270.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Mary Beth Norton		Date of Receipt
Mailing Address 159 W Remington Rd		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Ithaca	NY	14850
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4238804
Name of Employer	Occupation	Amount of Each Receipt this Period
Cornell University	Professor	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3200.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1040.00"/>
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 1200 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Edward V. Norton
 Full Name (Last, First, Middle Initial)
 Mailing Address 6500 America Blvd. #205
 City Hyattsville State MD Zip Code 20782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Library Of Congress Occupation Legislative Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4226718
 Amount of Each Receipt this Period 25.00

B. Ms. Margaret Norton
 Full Name (Last, First, Middle Initial)
 Mailing Address 3427 Via Janna Circle
 City Santa Fe State NM Zip Code 87507
 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 ▼ 275.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4234714
 Amount of Each Receipt this Period 50.00

C. Ms. Carol W. Norton
 Full Name (Last, First, Middle Initial)
 Mailing Address 312 Windsor Drive
 City Birmingham State AL Zip Code 35209
 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 ▼ 340.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4230085
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 1201 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol W. Norton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014
Mailing Address 312 Windsor Drive		Transaction ID : 4240716
City Birmingham	State AL	Zip Code 35209
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
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 ▼ 340.00	

Full Name (Last, First, Middle Initial) B. Ms. Teresa Norwig		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014
Mailing Address 3911 7Th St S		Transaction ID : 4231928
City Moorhead	State MN	Zip Code 56560
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Afscome Council 65	Occupation Union Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) C. Ms. Dianne Norwood		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014
Mailing Address 3016 NE Pacific Crest Dr.		Transaction ID : 4235881
City Bend	State OR	Zip Code 97701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
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 ▼ 565.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 1202 OF 2648
	<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)
EMILY's List

A. Mrs. Kerry K. Novick
 Full Name (Last, First, Middle Initial)
 Mailing Address 617 Stratford Drive
 City Ann Arbor State MI Zip Code 48104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Psychoanalyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 12 / 10 / 2014
Transaction ID : 4234515
 Amount of Each Receipt this Period 25.00

B. Ms. Marianne Novy
 Full Name (Last, First, Middle Initial)
 Mailing Address 5659 Marlborough Rd
 City Pittsburgh State PA Zip Code 15217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Pittsburgh Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 12 / 14 / 2014
Transaction ID : 4235423
 Amount of Each Receipt this Period 15.00

C. Ms. Betty A. Nuovo
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 Maple St., Unit 308
 City Middlebury State VT Zip Code 05753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Legislator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 23 / 2014
Transaction ID : 4239500
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 1203 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. James B. Nutter
 Mailing Address 1201 W 66th St
 City State Zip Code
 Kansas City MO 64113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 James B. Nutter & Company Mortgage Banker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2284.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227385
 Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
B. Frances Nyce
 Mailing Address 121 Smith Avenue
 City State Zip Code
 Westminster MD 21157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 938.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227346
 Amount of Each Receipt this Period
 188.00

Full Name (Last, First, Middle Initial)
C. Anne Oakes
 Mailing Address 145 Merrill Road
 City State Zip Code
 Ludlow VT 05149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233641
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 453.00
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 1204 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Donna Oba		Date of Receipt
Mailing Address PO Box 195		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hawi	HI	96719
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4234934
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="370.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Molly C. Oberbillig		Date of Receipt
Mailing Address 1907 Parlwpd Dr SE		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Olympia	WA	98501
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4234561
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1200.00"/>	

Full Name (Last, First, Middle Initial) c. Ms. Barbara B. Oberg		Date of Receipt
Mailing Address 57 Hodge Rd		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Princeton	NJ	08540
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4236976
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="450.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="315.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1205 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Suzanne Oberlin			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4231148
Mailing Address 641 manzanita Ct			Amount of Each Receipt this Period 1000.00
City Corte Madera	State CA	Zip Code 94925	
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Travel Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Stefanie Obkirchner			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4228058
Mailing Address 1 Sanford Ave			Amount of Each Receipt this Period 20.00
City Amsterdam	State NY	Zip Code 12010	
FEC ID number of contributing federal political committee. C			
Name of Employer Nys Its	Occupation Asst Dir It		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00		

Full Name (Last, First, Middle Initial) C. Stefanie Obkirchner			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240794
Mailing Address 1 Sanford Ave			Amount of Each Receipt this Period 20.00
City Amsterdam	State NY	Zip Code 12010	
FEC ID number of contributing federal political committee. C			
Name of Employer Nys Its	Occupation Asst Dir It		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00		

SUBTOTAL of Receipts This Page (optional).....▶	1040.00
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 1206 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Timothy J. O'Brien		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227578
Mailing Address 70 Burbank St Apt 6		Amount of Each Receipt this Period 80.00
City Boston	State MA	Zip Code 02115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Ability One-Work Inc	Occupation Custodian	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Full Name (Last, First, Middle Initial) B. Janet O'Brien		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4240042
Mailing Address 77 Granada Dr Apt 3a		Amount of Each Receipt this Period 20.00
City Corte Madera	State CA	Zip Code 94925
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Self	Occupation Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 565.00	

Full Name (Last, First, Middle Initial) C. Janet O'Brien		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238806
Mailing Address 77 Granada Dr Apt 3a		Amount of Each Receipt this Period 25.00
City Corte Madera	State CA	Zip Code 94925
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Self	Occupation Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 565.00	

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 1207 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathleen LeClair O'Brien		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232340
Mailing Address 1011 E. Port Au Prince Lane		Amount of Each Receipt this Period 150.00
City Phoenix	State AZ	Zip Code 85022
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Medical Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Elmer Occhiuzzo		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232623
Mailing Address 711 W. Madison Ave		Amount of Each Receipt this Period 50.00
City Magnolia	State NJ	Zip Code 08048
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1355.00	

Full Name (Last, First, Middle Initial) C. Elmer Occhiuzzo		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234470
Mailing Address 711 W. Madison Ave		Amount of Each Receipt this Period 50.00
City Magnolia	State NJ	Zip Code 08048
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1355.00	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 1208 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Elmer Occhiuzzo

Mailing Address 711 W. Madison Ave

City Magnolia State NJ Zip Code 08048

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 ▼
1355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237174

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Ms. Barbara Oceanlight

Mailing Address 457 Carneros Ave Apt 2

City Sunnyvale State CA Zip Code 94086

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Family & Children Services Clinical Counselor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240043

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Mrs. Ellen B. Ochs

Mailing Address E4426 County Road D

City Menomonie State WI Zip Code 54751

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

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
 12 / 01 / 2014
Transaction ID : 4230685

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

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 1209 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Michael O'Connor		Date of Receipt
Mailing Address 1012 Knob Creek Lane		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Tega Cay SC 29708		Transaction ID : 4228059
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
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 ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Michael O'Connor		Date of Receipt
Mailing Address 1012 Knob Creek Lane		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Tega Cay SC 29708		Transaction ID : 4240784
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
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 ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Ethel Oda		Date of Receipt
Mailing Address 509 University Ave., Apt. 402		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City State Zip Code Honolulu HI 96826		Transaction ID : 4234805
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="50.00"/>
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 ▼ <input type="text" value="235.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1210 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Anne Odell

Mailing Address 701 W Beech St Ste 1905

City San Diego State CA Zip Code 92101

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 ▼
725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232721

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. Ms. Anne Odell

Mailing Address 701 W Beech St Ste 1905

City San Diego State CA Zip Code 92101

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 ▼
725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237121

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Susan Odell

Mailing Address 1503 Sharon Dr

City Silver Spring State MD Zip Code 20910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227756

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

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 1211 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Brendan O'Donnell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014
Mailing Address 157 Caroline St		Transaction ID : 4237142
City Saratoga Springs	State NY	Zip Code 12866
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer Self	Occupation Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Ms. Karen L. Oehme		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2014
Mailing Address 2021 Winthrop Way		Transaction ID : 4231152
City Tallahassee	State FL	Zip Code 32308
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Florida State University	Occupation researcher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Leslie Oelsner		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014
Mailing Address 1451 Canterbury Rd.		Transaction ID : 4236323
City Fayetteville	State AR	Zip Code 72701
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Self	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 1212 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Judith Oestreich		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014
Mailing Address 1 Wellhouse Lane		Transaction ID : 4244750
City Mamaroneck	State NY	Zip Code 10543
FEC ID number of contributing federal political committee.	C	
Name of Employer N/A	Occupation Volunteer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
		Amount of Each Receipt this Period 100.00

Full Name (Last, First, Middle Initial) B. Karen Offen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 18 / 2014
Mailing Address 450 Raymundo Drive		Transaction ID : 4238131
City Woodside	State CA	Zip Code 94062
FEC ID number of contributing federal political committee.	C	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
		Amount of Each Receipt this Period 1000.00

Full Name (Last, First, Middle Initial) C. Ms. Susan Denise Offutt		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014
Mailing Address 2785 Pacific Coast Hwy Ste E267		Transaction ID : 4240290
City Torrance	State CA	Zip Code 90505
FEC ID number of contributing federal political committee.	C	
Name of Employer Epsan, Inc	Occupation Market Research	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
		Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional).....▶	1160.00
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 1213 OF 2648
	<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)
EMILY's List

A. Ms. Cindy Offutt
Full Name (Last, First, Middle Initial)
Mailing Address 8714 Timberland Trl
City Boerne State TX Zip Code 78015
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 ▼ 240.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231765
Amount of Each Receipt this Period
200.00

B. Ms. Jill Maunder Ogden
Full Name (Last, First, Middle Initial)
Mailing Address 1718 Follow Thru Rd. N
City Saint Petersburg State FL Zip Code 33710
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 ▼ 800.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238809
Amount of Each Receipt this Period
100.00

C. Ms. Maeve S. O'Higgins
Full Name (Last, First, Middle Initial)
Mailing Address 1400 N Powhatan Street
City Arlington State VA Zip Code 22205
FEC ID number of contributing federal political committee. **C**
Name of Employer Tahirih Justice Center Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240927
Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	270.00
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 1214 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Sue O'Keeffe
 Full Name (Last, First, Middle Initial)
 Mailing Address 153 Arden Rd.
 City Columbus State OH Zip Code 43214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ohio State University Occupation Administrative Associate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : 4239427
 Amount of Each Receipt this Period
 15.00

B. Francisco Okhuysen
 Full Name (Last, First, Middle Initial)
 Mailing Address 391 Oliver Rd
 City Cincinnati State OH Zip Code 45215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Stay-At-Home Parent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235890
 Amount of Each Receipt this Period
 20.00

C. Elizabeth O'Leary
 Full Name (Last, First, Middle Initial)
 Mailing Address 511 E. San Ysidro Blvd. J-600
 City San Ysidro State CA Zip Code 92173
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237122
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 1215 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. James Olin		Date of Receipt
Mailing Address 1 Fox Knoll Ct		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Lutherville	MD	21093
FEC ID number of contributing federal political committee.		Transaction ID : 4238810
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="240.00"/>
Name of Employer	Occupation	
Baltimore Symphony	Musician	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Jane Olin		Date of Receipt
Mailing Address 46 La Rancheria		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Carmel Valley	CA	93924
FEC ID number of contributing federal political committee.		Transaction ID : 4232800
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	Occupation	
Self	Photographer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Barbara Oliner		Date of Receipt
Mailing Address 58 W58th St #28c		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Ny	NY	10019
FEC ID number of contributing federal political committee.		Transaction ID : 4229140
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
None	English Professor	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="295.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1216 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Oliner		Date of Receipt
Mailing Address 58 W58th St #28c		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Ny	NY	10019
FEC ID number of contributing federal political committee.		Transaction ID : 4241309
Name of Employer		Amount of Each Receipt this Period
None		<input type="text" value="225.00"/>
Occupation		
English Professor		
Receipt For:		Aggregate Year-to-Date ▼
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="225.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Mary Ellen Oliveira		Date of Receipt
Mailing Address 5790 Stanley Dr.		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Auburn	CA	95602
FEC ID number of contributing federal political committee.		Transaction ID : 4235291
Name of Employer		Amount of Each Receipt this Period
None		<input type="text" value="80.00"/>
Occupation		
Retired		
Receipt For:		Aggregate Year-to-Date ▼
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="506.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Judith Oliver		Date of Receipt
Mailing Address 5665 Lamplighter		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Kalamazoo	MI	49009
FEC ID number of contributing federal political committee.		Transaction ID : 4231822
Name of Employer		Amount of Each Receipt this Period
None		<input type="text" value="10.00"/>
Occupation		
None		
Receipt For:		Aggregate Year-to-Date ▼
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="225.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="115.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1217 OF 2648
	<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)
EMILY's List

A. Ms. Judith Oliver
Full Name (Last, First, Middle Initial)
Mailing Address 5665 Lamplighter

City Kalamazoo	State MI	Zip Code 49009
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt
12 / 06 / 2014
Transaction ID : 4232485

Amount of Each Receipt this Period
15.00

B. Ms. Judith Oliver
Full Name (Last, First, Middle Initial)
Mailing Address 5665 Lamplighter

City Kalamazoo	State MI	Zip Code 49009
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234148

Amount of Each Receipt this Period
15.00

C. Ms. Alice Olmstead
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1973

City Murphys	State CA	Zip Code 95247
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 ▼ 250.00	

Date of Receipt
12 / 09 / 2014
Transaction ID : 4233826

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 1218 OF 2648
	<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)
EMILY's List

A. Ms. Margaret Olness
Full Name (Last, First, Middle Initial)
Mailing Address 31 William Penn Dr.
City Stony Brook State NY Zip Code 11790
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 29 / 2014
Transaction ID : 4242836
Amount of Each Receipt this Period
250.00

B. Melvin Olney
Full Name (Last, First, Middle Initial)
Mailing Address 5068 Taylor Creek Drive
City Jacksonville State FL Zip Code 32258
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 30 / 2014
Transaction ID : 4229595
Amount of Each Receipt this Period
25.00

C. Felix Olobatuyi
Full Name (Last, First, Middle Initial)
Mailing Address 1904 Deerfield Dr
City Temple State TX Zip Code 76502
FEC ID number of contributing federal political committee. **C**
Name of Employer Baylor Scott And White Healthcare Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4240045
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 1219 OF 2648
	<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)
EMILY's List

A. Ms. Barbara Olsen
Full Name (Last, First, Middle Initial)
Mailing Address 26 Robin Wood Rd.
City Concord State MA Zip Code 01742
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **532.00**

Date of Receipt **12 / 06 / 2014**
Transaction ID : 4232437
Amount of Each Receipt this Period **18.00**

B. Ms. Susan Link Olsen
Full Name (Last, First, Middle Initial)
Mailing Address 854 Sutton Ct
City Lincolnshire State IL Zip Code 60069
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt **11 / 26 / 2014**
Transaction ID : 4227700
Amount of Each Receipt this Period **100.00**

C. Mrs. Maxine Olson
Full Name (Last, First, Middle Initial)
Mailing Address 121 Lakewood Lane
City Marquette State MI Zip Code 49855
FEC ID number of contributing federal political committee. **C**
Name of Employer MAISD Occupation Consultant
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **725.00**

Date of Receipt **12 / 02 / 2014**
Transaction ID : 4231155
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **218.00**
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 1220 OF 2648
	<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)
EMILY's List

A. Ms. Karen I. Olson
Full Name (Last, First, Middle Initial)
Mailing Address 15 Loma Vista Ln.
City Burlingame State CA Zip Code 94010
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 15 / 2014
Transaction ID : 4236494
Amount of Each Receipt this Period 25.00

B. Ms. Dorothy Olson
Full Name (Last, First, Middle Initial)
Mailing Address 7500 North Calle Sin Envidla Apt. #10105
City Tucson State AZ Zip Code 85718
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Potter
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 239.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4231564
Amount of Each Receipt this Period 13.00

C. Deborah Olszewski
Full Name (Last, First, Middle Initial)
Mailing Address 1518 Woodsboro
City Royal Oak State MI Zip Code 48067
FEC ID number of contributing federal political committee. **C**
Name of Employer Karmanos Cancer Institute Occupation Nurse Practitioner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4229787
Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 53.00
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 1221 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Deborah Olszewski		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4240046
Mailing Address 1518 Woodsboro		Amount of Each Receipt this Period 15.00
City Royal Oak	State MI	Zip Code 48067
FEC ID number of contributing federal political committee. C	Name of Employer Karmanos Cancer Institute	Occupation Nurse Practitioner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Ms. Helen M. O'Mara		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4231814
Mailing Address 5709 8th Ave		Amount of Each Receipt this Period 200.00
City Sacramento	State CA	Zip Code 95820
FEC ID number of contributing federal political committee. C	Name of Employer Ca Dept Of Transportation	Occupation Civil Engineer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Ms. Melissa O'Mara		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233714
Mailing Address 6028 Quail Ridge Dr		Amount of Each Receipt this Period 50.00
City Tully	State NY	Zip Code 13159
FEC ID number of contributing federal political committee. C	Name of Employer Self	Occupation Leadership And Change Consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 635.00	

SUBTOTAL of Receipts This Page (optional).....▶	265.00
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 1223 OF 2648
	<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)
EMILY's List

A. Ms. May Parish O'Neal
Full Name (Last, First, Middle Initial)
Mailing Address 434 Abiso Ave.
City San Antonio State TX Zip Code 78209
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 08 / 2014
Transaction ID : 4233068
Amount of Each Receipt this Period 25.00

B. Mrs. Rita O'Neill
Full Name (Last, First, Middle Initial)
Mailing Address 1401 Copper Beech Run
City Fort Wayne State IN Zip Code 46814
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt 12 / 17 / 2014
Transaction ID : 4237439
Amount of Each Receipt this Period 150.00

C. Mr. Joe Ong
Full Name (Last, First, Middle Initial)
Mailing Address 4678 SW 47th Pl
City Corvallis State OR Zip Code 97333
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 ▼ 382.00

Date of Receipt 12 / 17 / 2014
Transaction ID : 4237391
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 1224 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Connie Onyon			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229148
Mailing Address 3010 W. Mirage Ct.			Amount of Each Receipt this Period 25.00
City Meridian	State ID	Zip Code 83646	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 275.00
Name of Employer Jones & Swartz PLLC		Occupation Office Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. Connie Onyon			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242256
Mailing Address 3010 W. Mirage Ct.			Amount of Each Receipt this Period 25.00
City Meridian	State ID	Zip Code 83646	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 275.00
Name of Employer Jones & Swartz PLLC		Occupation Office Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. Ms. Pam Oppenheim			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239561
Mailing Address 14463 66th St. N.			Amount of Each Receipt this Period 100.00
City Loxahatchee	State FL	Zip Code 33470	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 300.00
Name of Employer Requested		Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1225 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. William Oram

Mailing Address 47 Munroe Street

City Northampton State MA Zip Code 01060

FEC ID number of contributing federal political committee. **C**

Name of Employer Smith College Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243567

Amount of Each Receipt this Period
 15.00

Full Name (Last, First, Middle Initial)
B. Ms. J. E. Orbach

Mailing Address 156 Towne Ter

City Santa Cruz State CA Zip Code 95060

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 ▼
410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234819

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
c. Ms. Deborah Ornstein

Mailing Address 424 Lower Bailey RD

City Thetford Center State VT Zip Code 05075

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230692

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	265.00
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 1226 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Paula Orosz

Mailing Address 1520 Estee Ave.

City Napa State CA Zip Code 94558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
398.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4236034

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Cynthia Orr

Mailing Address 30080 Robert St

City Wickliffe State OH Zip Code 44092

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cynthia Orr Consulting Library Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232760

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
C. Mrs. Patricia A. Orr

Mailing Address 108 W. Market St.

City Freeburg State PA Zip Code 17827

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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229152

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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 1227 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Patricia A. Orr
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 W. Market St.
 City Freeburg State PA Zip Code 17827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242258
 Amount of Each Receipt this Period
 25.00

B. Patricia Orrange
 Full Name (Last, First, Middle Initial)
 Mailing Address 1409 Granada Dr
 City Raleigh State NC Zip Code 27612
 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 ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229153
 Amount of Each Receipt this Period
 50.00

C. Patricia Orrange
 Full Name (Last, First, Middle Initial)
 Mailing Address 1409 Granada Dr
 City Raleigh State NC Zip Code 27612
 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 ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242259
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 1228 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Kelly Orringer
 Full Name (Last, First, Middle Initial)
 Mailing Address 2321 Tall Oaks Dr
 City Ann Arbor State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U Michigan Health System Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 12 / 16 / 2014
Transaction ID : 4237112
 Amount of Each Receipt this Period
 20.00

B. Mr. Frederic Osgood
 Full Name (Last, First, Middle Initial)
 Mailing Address 8502 Georgian Place
 City Annadale State VA Zip Code 22003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4233984
 Amount of Each Receipt this Period
 20.00

C. Ms. Laura N. O'Shaughnessy
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Gilmore Avenue
 City Great Barrington State MA Zip Code 01230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lnos@Stlawu.Edu Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 12 / 14 / 2014
Transaction ID : 4235364
 Amount of Each Receipt this Period
 12.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 52.00
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 1229 OF 2648
	<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)
EMILY's List

A. Ms. Jane Oski
Full Name (Last, First, Middle Initial)
Mailing Address 2347 E. Forest Heights Dr
City Flagstaff State AZ Zip Code 86004
FEC ID number of contributing federal political committee. **C**
Name of Employer Tubacity Regional Health Care Corporat Occupation Physician. Please Never Call My
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014
Transaction ID : 4234977
Amount of Each Receipt this Period
30.00

B. Mr. Harry Ostrer
Full Name (Last, First, Middle Initial)
Mailing Address 369 W. 120th St.
City New York State NY Zip Code 10027
FEC ID number of contributing federal political committee. **C**
Name of Employer Albbert Einstein College of Medicien Occupation physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2014
Transaction ID : 4235320
Amount of Each Receipt this Period
250.00

c. Ms. Carol Oukrop
Full Name (Last, First, Middle Initial)
Mailing Address 1858 Platt Street
City Manhattan State KS Zip Code 66502
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 ▼ 5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014
Transaction ID : 4237402
Amount of Each Receipt this Period
2300.00

SUBTOTAL of Receipts This Page (optional).....▶	2580.00
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 1230 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Jean Ousterhout

Mailing Address 1831 SE 46th Ave

City Portland	State OR	Zip Code 97215
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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
 M M / D D / Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243361

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Marlis Overgard

Mailing Address P. O. Box 190

City Faulkton	State SD	Zip Code 57438
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Educational Materials Sales
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230084

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
c. Marlis Overgard

Mailing Address P. O. Box 190

City Faulkton	State SD	Zip Code 57438
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Educational Materials Sales
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240715

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 1231 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia A. Overholt		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227782
Mailing Address 5 King Ave		Amount of Each Receipt this Period 50.00
City Jekyll Island	State GA	Zip Code 31527
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	

Full Name (Last, First, Middle Initial) B. Chelsey Owen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238816
Mailing Address 1640 72nd Avenue SE		Amount of Each Receipt this Period 100.00
City Mercer Island	State WA	Zip Code 98040
FEC ID number of contributing federal political committee. C		
Name of Employer 10th Muse Group, Llc	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. Richard Owens		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232172
Mailing Address 9109 Colt Lane		Amount of Each Receipt this Period 20.00
City Annandale	State VA	Zip Code 22003
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional).....▶	170.00
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 1232 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Barbara A. Owens		Date of Receipt
Mailing Address 300 Ridgetop Ct		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Franklin	TN	37067
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4229155
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="283.00"/>	

Full Name (Last, First, Middle Initial) B. Mrs. Barbara A. Owens		Date of Receipt
Mailing Address 300 Ridgetop Ct		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Franklin	TN	37067
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4242260
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="283.00"/>	

Full Name (Last, First, Middle Initial) C. Tim Owens		Date of Receipt
Mailing Address 5666 E. Hampton St. Apt#229		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Tucson	AZ	85712
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4232788
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="620.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1233 OF 2648
	<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)
EMILY's List

A. Ms. E. Dianne Dianne Owens
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 Aldebaran Ave.
 City Lompoc State CA Zip Code 93436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Consultant
 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
 12 / 19 / 2014
Transaction ID : 4238817
 Amount of Each Receipt this Period
 100.00

B. Ms. E. Dianne Dianne Owens
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 Aldebaran Ave.
 City Lompoc State CA Zip Code 93436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Consultant
 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
 12 / 30 / 2014
Transaction ID : 4242949
 Amount of Each Receipt this Period
 100.00

C. Mr. Andrejs Ozolins
 Full Name (Last, First, Middle Initial)
 Mailing Address 733 Cliff St
 City Ithaca State NY Zip Code 14850
 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 **345.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232720
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... **215.00**
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 1234 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Mr. Andrejs Ozolins
 Full Name (Last, First, Middle Initial)
 Mailing Address 733 Cliff St
 City Ithaca State NY Zip Code 14850
 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 ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241045
 Amount of Each Receipt this Period
 35.00

B. Colleen Pace
 Full Name (Last, First, Middle Initial)
 Mailing Address 8375 E. Coldwater Road
 City Davison State MI Zip Code 48423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 05 / 2014
Transaction ID : 4232620
 Amount of Each Receipt this Period
 25.00

C. Ms. Monica Pacheco-Tougas
 Full Name (Last, First, Middle Initial)
 Mailing Address 87 Florence Road
 City Waltham State MA Zip Code 02453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Technologies Occupation Engineer
 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 / 25 / 2014
Transaction ID : 4227380
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 1235 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
EMILY's List

A. Ms. Monica Pacheco-Tougas
 Full Name (Last, First, Middle Initial)
 Mailing Address 87 Florence Road
 City Waltham State MA Zip Code 02453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Technologies Occupation Engineer
 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
 12 / 26 / 2014
Transaction ID : 4240755
 Amount of Each Receipt this Period
 25.00

B. Ms. Barbara Page
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 Market St Apt 601
 City Lowell State MA Zip Code 01852
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231160
 Amount of Each Receipt this Period
 25.00

C. Margo Painter
 Full Name (Last, First, Middle Initial)
 Mailing Address 7271 Chapel St
 City Pensacola State FL Zip Code 32504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Main Street Properties Occupation Realtor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229156
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 1236 OF 2648
	(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

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)
EMILY's List

A. Ms. Ruth Palace
Full Name (Last, First, Middle Initial)
Mailing Address 412 Walden Pl.
City Pompton Plains State NJ Zip Code 07444
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 253.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2014
Transaction ID : 4232546
Amount of Each Receipt this Period
15.00

B. Marilyn Palermo
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 984
City Pine Valley State CA Zip Code 91962
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
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
12 / 06 / 2014
Transaction ID : 4232544
Amount of Each Receipt this Period
25.00

C. Mr. John Palka
Full Name (Last, First, Middle Initial)
Mailing Address P. O. Box 135
City Langley State WA Zip Code 98260
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 810.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014
Transaction ID : 4236848
Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 1237 OF 2648
	<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

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. John Palka		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229159
Mailing Address P. O. Box 135		Amount of Each Receipt this Period 50.00
City Langley	State WA	Zip Code 98260
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 810.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. John Palka		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242261
Mailing Address P. O. Box 135		Amount of Each Receipt this Period 50.00
City Langley	State WA	Zip Code 98260
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 810.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Mary Pallares		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237438
Mailing Address 314 Cumberland Road		Amount of Each Receipt this Period 150.00
City Glendale	State CA	Zip Code 91202
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 400.00	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 1238 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. B J Palma		Date of Receipt
Mailing Address 980 E. Foothills Dr		<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
Tucson	AZ	85718
FEC ID number of contributing federal political committee.		Transaction ID : 4238096
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="315.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Donald G. Palmer		Date of Receipt
Mailing Address 2509 Bear Den Dr.		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Frederick	MD	21701
FEC ID number of contributing federal political committee.		Transaction ID : 4230697
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>
Name of Employer	Occupation	
Acuta Llc	Regulatory Kim	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Patricia J. Palmer		Date of Receipt
Mailing Address 73 Hillside Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Wayland	MA	01778
FEC ID number of contributing federal political committee.		Transaction ID : 4243188
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="125.00"/>
Name of Employer	Occupation	
None	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) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="215.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 1239 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jayasri Pandian		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014 Transaction ID : 4235779
Mailing Address 536 East 79 Street, 1c		Amount of Each Receipt this Period 50.00
City New York	State NY	Zip Code 10075
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Sujit K. Pandit		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234604
Mailing Address 2680 Lowell RD		Amount of Each Receipt this Period 50.00
City Ann Arbor	State MI	Zip Code 48103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 890.00
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 ▼ 890.00	

Full Name (Last, First, Middle Initial) C. Shree Pandya		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230157
Mailing Address 132 Shoreham Dr.		Amount of Each Receipt this Period 20.00
City Rochester	State NY	Zip Code 14618
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer University Of Rochester	Occupation Physical Therapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 1240 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Shree Pandya
 Full Name (Last, First, Middle Initial)
 Mailing Address 132 Shoreham Dr.
 City Rochester State NY Zip Code 14618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Rochester Occupation Physical Therapist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240799
 Amount of Each Receipt this Period
 20.00

B. Patricia Panto
 Full Name (Last, First, Middle Initial)
 Mailing Address 1250 Golf Way
 City Placerville State CA Zip Code 95667
 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 ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235876
 Amount of Each Receipt this Period
 20.00

C. Diane L. Paolazzi
 Full Name (Last, First, Middle Initial)
 Mailing Address 2313 Callejon Hermosa
 City Santa Fe State NM Zip Code 87505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer L. Martinez, Md Occupation Nurse Practitioner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240050
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 1241 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Leah Papernick
 Full Name (Last, First, Middle Initial)
 Mailing Address 4339 Thackeray Place NE
 City Seattle State WA Zip Code 98105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231908
 Amount of Each Receipt this Period
 20.00

B. Myrl Pardee
 Full Name (Last, First, Middle Initial)
 Mailing Address 8904 Talisman Drive
 City Sacramento State CA Zip Code 95826
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233383
 Amount of Each Receipt this Period
 10.00

C. Myrl Pardee
 Full Name (Last, First, Middle Initial)
 Mailing Address 8904 Talisman Drive
 City Sacramento State CA Zip Code 95826
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240051
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 1242 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ann Parham		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4239566
Mailing Address 407 Cambridge Rd.		Amount of Each Receipt this Period 150.00
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Joan Elliott Parker		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229161
Mailing Address 811 Old Plank Rd		Amount of Each Receipt this Period 15.00
City Chandler	State IN	Zip Code 47610
FEC ID number of contributing federal political committee. C		
Name of Employer Ohio Twp Public Library	Occupation Librarian	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Joan Elliott Parker		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242263
Mailing Address 811 Old Plank Rd		Amount of Each Receipt this Period 15.00
City Chandler	State IN	Zip Code 47610
FEC ID number of contributing federal political committee. C		
Name of Employer Ohio Twp Public Library	Occupation Librarian	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 1243 OF 2648
	<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)
EMILY's List

A. Mr. William C Parks
Full Name (Last, First, Middle Initial)
Mailing Address 2501 Limerick Ln
City Columbia State MO Zip Code 65203
FEC ID number of contributing federal political committee. **C**
Name of Employer Epmm Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014
Transaction ID : 4238820
Amount of Each Receipt this Period
20.00

B. Mary Parks
Full Name (Last, First, Middle Initial)
Mailing Address 43305 Hill Head Place
City Leesburg State VA Zip Code 20176
FEC ID number of contributing federal political committee. **C**
Name of Employer Hilton Worldwide Occupation Marketing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4229162
Amount of Each Receipt this Period
25.00

C. Mary Parks
Full Name (Last, First, Middle Initial)
Mailing Address 43305 Hill Head Place
City Leesburg State VA Zip Code 20176
FEC ID number of contributing federal political committee. **C**
Name of Employer Hilton Worldwide Occupation Marketing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2014
Transaction ID : 4236094
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 1244 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mary Parks
 Full Name (Last, First, Middle Initial)
 Mailing Address 43305 Hill Head Place
 City Leesburg State VA Zip Code 20176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hilton Worldwide Occupation Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 12 / 28 / 2014
Transaction ID : 4241365
 Amount of Each Receipt this Period
 25.00

B. Ms. Judith Parks
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 River Rd.
 City Rollinsford State NH Zip Code 03869
 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
 12 / 03 / 2014
Transaction ID : 4231459
 Amount of Each Receipt this Period
 125.00

C. Barbara Parks
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Griffing Place
 City Queensbury State NY Zip Code 12804
 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 ▼ 525.00

Date of Receipt
 12 / 06 / 2014
Transaction ID : 4232443
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
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 1245 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Brenda Parnell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230163
Mailing Address 1005A Fell St.		Amount of Each Receipt this Period 50.00
City San Francisco	State CA	Zip Code 94117
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Ms. Brenda Parnell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240818
Mailing Address 1005A Fell St.		Amount of Each Receipt this Period 50.00
City San Francisco	State CA	Zip Code 94117
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Mary Parran		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2014 Transaction ID : 4235514
Mailing Address 5630 Grace Woods Drive #213		Amount of Each Receipt this Period 25.00
City Willoughby	State OH	Zip Code 44094
FEC ID number of contributing federal political committee. C		
Name of Employer Requested None	Occupation Requested None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 1246 OF 2648
	<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)
EMILY's List

A. Mary Parran
Full Name (Last, First, Middle Initial)

Mailing Address 5630 Grace Woods Drive #213

City Willoughby	State OH	Zip Code 44094
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

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
 12 / 23 / 2014

Transaction ID : 4239635

Amount of Each Receipt this Period
75.00

B. W Celeste Parsons
Full Name (Last, First, Middle Initial)

Mailing Address 15085 Wolfe-Bennett Road

City Nelsonville	State OH	Zip Code 45764
---------------------	-------------	-------------------

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
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014

Transaction ID : 4232326

Amount of Each Receipt this Period
125.00

C. Ms. Barbara H Partee
Full Name (Last, First, Middle Initial)

Mailing Address 50 Hobart Ln

City Amherst	State MA	Zip Code 01002
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4244825

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	220.00
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 1247 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Janaki Parthasarathy		Date of Receipt MM / DD / YYYY 12 / 12 / 2014 Transaction ID : 4235739
Mailing Address 41-15 46th Street Apt 4m		Amount of Each Receipt this Period 10.00
City Sunnyside	State NY	
Zip Code 11104		Aggregate Year-to-Date ▼ 620.00
FEC ID number of contributing federal political committee. C		
Name of Employer Foothold Technology	Occupation Implementation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Janaki Parthasarathy		Date of Receipt MM / DD / YYYY 11 / 25 / 2014 Transaction ID : 4229710
Mailing Address 41-15 46th Street Apt 4m		Amount of Each Receipt this Period 15.00
City Sunnyside	State NY	
Zip Code 11104		Aggregate Year-to-Date ▼ 620.00
FEC ID number of contributing federal political committee. C		
Name of Employer Foothold Technology	Occupation Implementation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Janaki Parthasarathy		Date of Receipt MM / DD / YYYY 11 / 26 / 2014 Transaction ID : 4228067
Mailing Address 41-15 46th Street Apt 4m		Amount of Each Receipt this Period 25.00
City Sunnyside	State NY	
Zip Code 11104		Aggregate Year-to-Date ▼ 620.00
FEC ID number of contributing federal political committee. C		
Name of Employer Foothold Technology	Occupation Implementation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 1248 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Janaki Parthasarathy
 Full Name (Last, First, Middle Initial)
 Mailing Address 41-15 46th Street
 Apt 4m
 City Sunnyside State NY Zip Code 11104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Foothold Technology Occupation Implementation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231820
 Amount of Each Receipt this Period
 50.00

B. Dr. Nicholas Passell
 Full Name (Last, First, Middle Initial)
 Mailing Address 524 Lincoln Avenue
 City Eau Claire State WI Zip Code 54701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232006
 Amount of Each Receipt this Period
 25.00

C. Ms. Marjorie Passman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3118 Todd Dr
 City Madison State WI Zip Code 53713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Madison, Wi Schools Occupation School Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229164
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 1249 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marjorie Passman		Date of Receipt
Mailing Address 3118 Todd Dr		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Madison	State WI	Zip Code 53713
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4242264
Name of Employer Madison, WI Schools	Occupation School Board Member	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Madeline Pasteelnick		Date of Receipt
Mailing Address 4 Deepdale Drive		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City Randolph	State NJ	Zip Code 07869
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4231720
Name of Employer REQUESTED	Occupation REQUESTED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
	<input type="text" value="290.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Natalie M. Pastor		Date of Receipt
Mailing Address 190 Amador Avenue		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City San Bruno	State CA	Zip Code 94066
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4235994
Name of Employer REQUESTED	Occupation REQUESTED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="15.00"/>
	<input type="text" value="220.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="85.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1250 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Katherine W. Paterson		Date of Receipt
Mailing Address 171 Westview Meadows Rd.#10		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4229839
Montpelier	VT	Amount of Each Receipt this Period
Zip Code		<input type="text" value="1000.00"/>
05602		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Writer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2460.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. William Pates		Date of Receipt
Mailing Address 21 Medau Pl.		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4227619
San Francisco	CA	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
94133		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Sarah N. Patterson		Date of Receipt
Mailing Address 3659 Greenhill Drive		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4240053
Atlanta	GA	Amount of Each Receipt this Period
Zip Code		<input type="text" value="15.00"/>
30341		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="280.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1115.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1251 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Mildred A. Patterson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3166 20th St. N
 City State Zip Code
 Arlington VA 22201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4242670
 Amount of Each Receipt this Period
 150.00

B. Ms. Elizabeth Patterson
 Full Name (Last, First, Middle Initial)
 Mailing Address 780 McNell Road
 City State Zip Code
 Ojai CA 93023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Ojai Valley Emergency Physicians Medic Emergency Physician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229668
 Amount of Each Receipt this Period
 10.00

C. Ms. Elizabeth Patterson
 Full Name (Last, First, Middle Initial)
 Mailing Address 780 McNell Road
 City State Zip Code
 Ojai CA 93023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Ojai Valley Emergency Physicians Medic Emergency Physician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234950
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
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 1252 OF 2648
	<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)
EMILY's List

A. Ms. Elizabeth Patterson
Full Name (Last, First, Middle Initial)
Mailing Address 780 McNell Road

City Ojai	State CA	Zip Code 93023
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ojai Valley Emergency Physicians Medic	Occupation Emergency Physician
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241306

Amount of Each Receipt this Period
35.00

B. Ms. Virginia C. Patterson
Full Name (Last, First, Middle Initial)
Mailing Address 3608 Park Lane S.

City Mountain Brk	State AL	Zip Code 35213
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230701

Amount of Each Receipt this Period
100.00

C. Ms. Michelle Patterson
Full Name (Last, First, Middle Initial)
Mailing Address 3885 Jackson

City San Francisco	State CA	Zip Code 94118
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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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241652

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional).....▶	170.00
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 1253 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Anne Patterson
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 Buckingham St.
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Homemaker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **850.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242629
 Amount of Each Receipt this Period
 100.00

B. Mrs. Margaret Pattison
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 S. Brook Ln.
 City Anaheim State CA Zip Code 92807
 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 **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234388
 Amount of Each Receipt this Period
 50.00

C. Ms. Cynthia Paul
 Full Name (Last, First, Middle Initial)
 Mailing Address 4277 Aspen Ln.
 City Somis State CA Zip Code 93066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **700.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231165
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....	350.00
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 1254 OF 2648
	(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)
EMILY's List

A. Mrs. Brenda B. Paul
Full Name (Last, First, Middle Initial)

Mailing Address 4120 94th Ave SE

City Mercer Island State WA Zip Code 98040

FEC ID number of contributing federal political committee. **C**

Name of Employer Mercer Island Schools Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4236715

Amount of Each Receipt this Period
 25.00

B. William F. Paulsen
Full Name (Last, First, Middle Initial)

Mailing Address 408 Greenwich St PH

City New York State NY Zip Code 10013

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4236922

Amount of Each Receipt this Period
 15.00

C. Mr. Richard J. Paur
Full Name (Last, First, Middle Initial)

Mailing Address 5313 Tuliptree Lane

City Raleigh State NC Zip Code 27612

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Chemist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014

Transaction ID : 4232866

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00

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 1255 OF 2648
	<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)
EMILY's List

A. Mr. John M. Pavlovich
Full Name (Last, First, Middle Initial)

Mailing Address 1793 Scheffer Avenue

City Saint Paul State MN Zip Code 55116

FEC ID number of contributing federal political committee. **C**

Name of Employer Group Health, Inc. Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
11 / 28 / 2014
Transaction ID : 4229165

Amount of Each Receipt this Period
20.00

B. Mr. John M. Pavlovich
Full Name (Last, First, Middle Initial)

Mailing Address 1793 Scheffer Avenue

City Saint Paul State MN Zip Code 55116

FEC ID number of contributing federal political committee. **C**

Name of Employer Group Health, Inc. Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4242265

Amount of Each Receipt this Period
20.00

C. Dennis Payne
Full Name (Last, First, Middle Initial)

Mailing Address 2076 Dean

City Holt State MI Zip Code 48842

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 ▼ 505.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233620

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00

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 1256 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dennis Payne		Date of Receipt
Mailing Address 2076 Dean		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City Holt	State MI	Zip Code 48842
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4228328
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="15.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="505.00"/>		

Full Name (Last, First, Middle Initial) B. Dennis Payne		Date of Receipt
Mailing Address 2076 Dean		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Holt	State MI	Zip Code 48842
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4229167
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="15.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="505.00"/>		

Full Name (Last, First, Middle Initial) C. Dennis Payne		Date of Receipt
Mailing Address 2076 Dean		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City Holt	State MI	Zip Code 48842
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4241171
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="15.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="505.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1257 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Dennis Payne

Mailing Address 2076 Dean

City State Zip Code
Holt MI 48842

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4242266

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Mrs. Elizabeth S. Paynter

Mailing Address PO Box 184

City State Zip Code
Weston MA 02493

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : 4232730

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Margaret Pearce

Mailing Address 30 Quickstep Ln

City State Zip Code
San Francisco CA 94115

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 ▼
255.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4240056

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 1258 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Laurence D. Pearl
 Full Name (Last, First, Middle Initial)
 Mailing Address 905 East Capitol Street SE
 City Washington State DC Zip Code 20003
 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 ▼
 1225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239202
 Amount of Each Receipt this Period
 100.00

B. Ms. Nina J. Pearlmutter
 Full Name (Last, First, Middle Initial)
 Mailing Address 15814 W State Road 84
 City Sunrise State FL Zip Code 33326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Westgate Medical Center Physician
 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
 12 / 31 / 2014
Transaction ID : 4243463
 Amount of Each Receipt this Period
 500.00

C. Doris Pearson
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Wenonah Terrace
 City Tonawanda State NY Zip Code 14150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Guardian Fire Testing Laboratories, In Administrator
 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
 12 / 02 / 2014
Transaction ID : 4231167
 Amount of Each Receipt this Period
 100.00

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 1259 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Evelyn B Pearson
 Full Name (Last, First, Middle Initial)
 Mailing Address 407 Colburn Rd
 City Temple State NH Zip Code 03084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Main Street Title Services Llc Occupation Title Abstractor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 12 / 06 / 2014
Transaction ID : 4234005
 Amount of Each Receipt this Period
 10.00

B. Mrs. Evelyn B Pearson
 Full Name (Last, First, Middle Initial)
 Mailing Address 407 Colburn Rd
 City Temple State NH Zip Code 03084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Main Street Title Services Llc Occupation Title Abstractor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 12 / 17 / 2014
Transaction ID : 4237683
 Amount of Each Receipt this Period
 10.00

C. Ms. Pamela M Pearson
 Full Name (Last, First, Middle Initial)
 Mailing Address 116 Edgewater Park Street
 City Davidson State NC Zip Code 28036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wells Fargo Occupation Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4233357
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 1260 OF 2648
	<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)
EMILY's List

A. Ms. Pamela M Pearson
Full Name (Last, First, Middle Initial)
Mailing Address 116 Edgewater Park Street

City Davidson	State NC	Zip Code 28036
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Wells Fargo	Occupation Lawyer
---------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1040.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2014

Transaction ID : 4235139

Amount of Each Receipt this Period
50.00

B. Kirstin Peck
Full Name (Last, First, Middle Initial)
Mailing Address 4600 W. Moncrieff Pl

City Denver	State CO	Zip Code 80212
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mesa	Occupation Pilot
--------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4231884

Amount of Each Receipt this Period
25.00

C. Ms. Jane Pecsvaradi
Full Name (Last, First, Middle Initial)
Mailing Address 1801 Arboleda Ct.

City Reno	State NV	Zip Code 89521
--------------	-------------	-------------------

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 ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4227440

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....	275.00
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 1261 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Deborah S. Pedersen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014
Mailing Address 395 Farnham St SE		Transaction ID : 4230106
City Grand Rapids	State MI	Zip Code 49548
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Requested	Occupation Requested	Aggregate Year-to-Date ▼ 220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Andrea Pedolsky		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014
Mailing Address 3601 Connecticut Ave. NW #403		Transaction ID : 4237504
City Washington, Dc	State DC	Zip Code 20008
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Ifpri	Occupation Editor	Aggregate Year-to-Date ▼ 290.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Janet Peek		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2014
Mailing Address 1025 NW Couch St Unit 1012		Transaction ID : 4242831
City Portland	State OR	Zip Code 97209
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer None	Occupation None	Aggregate Year-to-Date ▼ 235.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	170.00
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 1262 OF 2648
	<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)
EMILY's List

A. Ms. Donna S. Pegues
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2483

City Borrego Springs	State CA	Zip Code 92004
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Date of Receipt
12 / 31 / 2014
Transaction ID : 4243490

Amount of Each Receipt this Period
100.00

B. Ms. Donna S. Pegues
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2483

City Borrego Springs	State CA	Zip Code 92004
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Date of Receipt
12 / 17 / 2014
Transaction ID : 4237846

Amount of Each Receipt this Period
150.00

C. Ms. Rona King Pehrson
Full Name (Last, First, Middle Initial)
Mailing Address 158 Brodia Way

City Walnut Creek	State CA	Zip Code 94598
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
12 / 16 / 2014
Transaction ID : 4237010

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	350.00
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 1263 OF 2648
	<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)
EMILY's List

A. Mr. Perry C. Peine
Full Name (Last, First, Middle Initial)

Mailing Address 343 Bellaire St.

City State Zip Code
Denver CO 80220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1575.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4232988

Amount of Each Receipt this Period
375.00

B. Donna Peizer
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 46

City State Zip Code
Crestone CO 81131

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238827

Amount of Each Receipt this Period
25.00

C. Ms. Pamela D. Pelletreau
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 183 27 Larches Way

City State Zip Code
Woods Hole MA 02543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4240060

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	420.00
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 1264 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Pamela D. Pelletreau
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 183 27 Larches Way
 City Woods Hole State MA Zip Code 02543
 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 ▼ 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2014
Transaction ID : 4244907
 Amount of Each Receipt this Period
 20.00

B. Mary Pelton Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 Longyear Dr
 City Negaunee State MI Zip Code 49866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Northern Michigan University Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229170
 Amount of Each Receipt this Period
 35.00

C. Jesse Penn
 Full Name (Last, First, Middle Initial)
 Mailing Address 2913 Windmill Road
 City Torrance State CA Zip Code 90505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231833
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00
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 1265 OF 2648
	<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)
EMILY's List

A. Ms. Sally Pennington
Full Name (Last, First, Middle Initial)
Mailing Address 1759 Friendship Road

City Waldoboro	State ME	Zip Code 04572
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	04	/	2014

Transaction ID : 4233993

Amount of Each Receipt this Period

1000.00	240.00
---------	--------

B. Dr. Gordon Perkin
Full Name (Last, First, Middle Initial)
Mailing Address 302 Lakeside Ave S

City Seattle	State WA	Zip Code 98144
-----------------	-------------	-------------------

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 ▼
721.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4232195

Amount of Each Receipt this Period

1000.00	53.00
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C. Ms. Victoria J Perkins
Full Name (Last, First, Middle Initial)
Mailing Address 11000 Huntover Dr.

City Rockville	State MD	Zip Code 20852
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Clark Enterprises, Inc.	Occupation Attorney
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	19	/	2014

Transaction ID : 4238830

Amount of Each Receipt this Period

1000.00	1000.00
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SUBTOTAL of Receipts This Page (optional).....▶	1073.00
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 1266 OF 2648
	<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)
EMILY's List

A. Ms. Nancy Perkins
Full Name (Last, First, Middle Initial)

Mailing Address 3535 North Hall Street #602

City Dallas	State TX	Zip Code 75219
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Manager
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	27	/	2014

Transaction ID : 4228372

Amount of Each Receipt this Period

25.00

B. Ms. Nancy Perkins
Full Name (Last, First, Middle Initial)

Mailing Address 3535 North Hall Street #602

City Dallas	State TX	Zip Code 75219
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Manager
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	27	/	2014

Transaction ID : 4240975

Amount of Each Receipt this Period

25.00

C. Ms. Nancy J. Perlman
Full Name (Last, First, Middle Initial)

Mailing Address 92 Oxford Street

City Glen Ridge	State NJ	Zip Code 07028
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Jfnj	Occupation Non-Profit
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4229174

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 1267 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy J. Perlman		Date of Receipt
Mailing Address 92 Oxford Street		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Glen Ridge NJ 07028		Transaction ID : 4229175
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer Jfnj	Occupation Non-Profit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="525.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Nancy J. Perlman		Date of Receipt
Mailing Address 92 Oxford Street		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Glen Ridge NJ 07028		Transaction ID : 4241604
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer Jfnj	Occupation Non-Profit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="525.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Nancy J. Perlman		Date of Receipt
Mailing Address 92 Oxford Street		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City State Zip Code Glen Ridge NJ 07028		Transaction ID : 4241605
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer Jfnj	Occupation Non-Profit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="525.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1268 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Kira Perov
 Full Name (Last, First, Middle Initial)
 Mailing Address 282 Granada Avenue
 City Long Beach State CA Zip Code 90803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Arts Admin, Self Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 12 / 05 / 2014
Transaction ID : 4232333
 Amount of Each Receipt this Period
 50.00

B. Mr. Stewart Perry
 Full Name (Last, First, Middle Initial)
 Mailing Address 1515 E Yesler Way Apt 302
 City Seattle State WA Zip Code 98122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231565
 Amount of Each Receipt this Period
 30.00

C. Mr. William D. Persell
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 Haskell Dr.
 City Bratenahl State OH Zip Code 44108
 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 ▼ 500.00

Date of Receipt
 12 / 29 / 2014
Transaction ID : 4242669
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 1269 OF 2648
	<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)
EMILY's List

A. Ms. Mariann Perseo
Full Name (Last, First, Middle Initial)
Mailing Address 340 W. 28 St.
City New York State NY Zip Code 10001
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 ▼ 535.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241236
Amount of Each Receipt this Period
85.00

B. Ms. Mariann Perseo
Full Name (Last, First, Middle Initial)
Mailing Address 340 W. 28 St.
City New York State NY Zip Code 10001
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 ▼ 535.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2014
Transaction ID : 4229617
Amount of Each Receipt this Period
50.00

C. Mr. Richard Persinger
Full Name (Last, First, Middle Initial)
Mailing Address 4115 Colter Dr
City Kokomo State IN Zip Code 46902
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
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
12 / 17 / 2014
Transaction ID : 4237752
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 1270 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lili Perski		Date of Receipt
Mailing Address 1604 Brookhaven Rd		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4237778
Wynnewood	PA	Amount of Each Receipt this Period
Zip Code		<input type="text" value="25.00"/>
19096		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="415.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Bertha Person		Date of Receipt
Mailing Address 166-25 Powells Cove Blvd. Apt. 19m		<input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4229510
Beechhurst	NY	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
11357		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Marian Peters		Date of Receipt
Mailing Address PO Box 957		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4239396
Bradenton	FL	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
34206		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Grimmy, Inc	President	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1271 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Marian Peters
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 957
 City Bradenton State FL Zip Code 34206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Grimm, Inc Occupation President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4244755
 Amount of Each Receipt this Period
100.00

B. Ann M. Peters
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 S Judd St., Apt. 501
 City Honolulu State HI Zip Code 96817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236722
 Amount of Each Receipt this Period
35.00

C. Ms. Lyn J Peters
 Full Name (Last, First, Middle Initial)
 Mailing Address 962 Farm Haven Drive
 City Rockville State MD Zip Code 20852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232837
 Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....	235.00
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 1272 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Robert Petersen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229178
Mailing Address 975 Memorial Drive		Amount of Each Receipt this Period 25.00
City Cambridge	State MA	Zip Code 02138
FEC ID number of contributing federal political committee. C		
Name of Employer Boston Children's Hospital Ophthalmolo	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2050.00	

Full Name (Last, First, Middle Initial) B. Dr. Robert Petersen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242271
Mailing Address 975 Memorial Drive		Amount of Each Receipt this Period 25.00
City Cambridge	State MA	Zip Code 02138
FEC ID number of contributing federal political committee. C		
Name of Employer Boston Children's Hospital Ophthalmolo	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2050.00	

Full Name (Last, First, Middle Initial) C. Ms. Susan Petersen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229179
Mailing Address 1343 9th St		Amount of Each Receipt this Period 60.00
City Astoria	State OR	Zip Code 97103
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 ▼ 820.00	

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 1273 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Susan Petersen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1343 9th St
 City Astoria State OR Zip Code 97103
 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 ▼ 820.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242272
 Amount of Each Receipt this Period
 60.00

B. Ms. Cheryl Petersen
 Full Name (Last, First, Middle Initial)
 Mailing Address 25-40 31st Avenue #4H
 City Astoria State NY Zip Code 11106
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4244893
 Amount of Each Receipt this Period
 50.00

C. Mr. E. Blake Peterson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4195 Bayberry Drive
 City Santa Rosa State CA Zip Code 95404
 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 ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243203
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00
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 1274 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Betty M. Peterson			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238833		
Mailing Address 1601 Hillcrest Road, Apt 71			Amount of Each Receipt this Period 30.00		
City Mobile	State AL	Zip Code 36695			
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 525.00			
Name of Employer None		Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name (Last, First, Middle Initial) B. Ms. Susan Peterson			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2014 Transaction ID : 4231169		
Mailing Address PO Box 40			Amount of Each Receipt this Period 100.00		
City Winthrop	State WA	Zip Code 98862			
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00			
Name of Employer Self Employed		Occupation CPA			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name (Last, First, Middle Initial) C. Barbara Peterson			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238832		
Mailing Address 201 Gerry Ct			Amount of Each Receipt this Period 15.00		
City Walnut Creek	State CA	Zip Code 94596			
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 205.00			
Name of Employer Self-Employed		Occupation Psychologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 1275 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Christina Peterson
 Full Name (Last, First, Middle Initial)
 Mailing Address 9112 58th Ave SE
 City Olympia State WA Zip Code 98513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Of Washington Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240065
 Amount of Each Receipt this Period
 20.00

B. Ms. Amelia Petrovich
 Full Name (Last, First, Middle Initial)
 Mailing Address 2674 Las Aromas
 City Oakland State CA Zip Code 94611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Bookkeeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233955
 Amount of Each Receipt this Period
 75.00

C. Mr. Harold Pfeffer
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 46
 City Garfield State MN Zip Code 56332
 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 ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237392
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 1276 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Pfleger		Date of Receipt
Mailing Address 7402 N Crossway RD		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City Milwaukee	State WI	Zip Code 53217
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4231499
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Penelope Phelan		Date of Receipt
Mailing Address 32061 N. Skyline Dr.		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Santan Valley	State AZ	Zip Code 85143
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4229181
Name of Employer None		Amount of Each Receipt this Period
Occupation None		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="205.00"/>	

Full Name (Last, First, Middle Initial) C. Penelope Phelan		Date of Receipt
Mailing Address 32061 N. Skyline Dr.		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City Santan Valley	State AZ	Zip Code 85143
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4233384
Name of Employer None		Amount of Each Receipt this Period
Occupation None		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="205.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="120.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1277 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Penelope Phelan
 Full Name (Last, First, Middle Initial)
 Mailing Address 32061 N. Skyline Dr.
 City State Zip Code
 Santan Valley AZ 85143
 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 ▼
 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241539
 Amount of Each Receipt this Period
 10.00

B. Ms. Regina Phelps
 Full Name (Last, First, Middle Initial)
 Mailing Address 258 Whitney Street
 City State Zip Code
 San Francisco CA 94131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Ems Solutions Inc. Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238836
 Amount of Each Receipt this Period
 1000.00

C. Mr. Kenneth D. Phelps
 Full Name (Last, First, Middle Initial)
 Mailing Address 18222 Crystal Cv.
 City State Zip Code
 San Antonio TX 78259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227634
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ► 1060.00
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 1278 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Adah G. Phelps		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230705
Mailing Address 1111 Bonforte Blvd Apt 1111		Amount of Each Receipt this Period 60.00
City Pueblo	State CO	Zip Code 81001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
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 ▼ 345.00	

Full Name (Last, First, Middle Initial) B. Patricia Philipps		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238837
Mailing Address 211 Emerson Dr		Amount of Each Receipt this Period 20.00
City Mebane	State NC	Zip Code 27302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Full Name (Last, First, Middle Initial) C. Ms. Janet K. Phillips		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4229776
Mailing Address 1700 E Hollow Oak Rd.		Amount of Each Receipt this Period 50.00
City Stigler	State OK	Zip Code 74462
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2090.00	

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 1279 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet K. Phillips		Date of Receipt
Mailing Address 1700 E Hollow Oak Rd.		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City Stigler	State OK	Zip Code 74462
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4238838
Name of Employer None		Amount of Each Receipt this Period
Occupation None		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="2090.00"/>		

Full Name (Last, First, Middle Initial) B. Ms. Janet K. Phillips		Date of Receipt
Mailing Address 1700 E Hollow Oak Rd.		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City Stigler	State OK	Zip Code 74462
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4239172
Name of Employer None		Amount of Each Receipt this Period
Occupation None		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="2090.00"/>		

Full Name (Last, First, Middle Initial) C. Ms. Janet K. Phillips		Date of Receipt
Mailing Address 1700 E Hollow Oak Rd.		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Stigler	State OK	Zip Code 74462
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4240826
Name of Employer None		Amount of Each Receipt this Period
Occupation None		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="2090.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1280 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary Lou W. Phillips		Date of Receipt
Mailing Address 118 S. 21st St #1220.		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City Philadelphia	State PA	Zip Code 19103
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4230234
Name of Employer: None		Amount of Each Receipt this Period
Occupation: Retired		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="220.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Mary Lou W. Phillips		Date of Receipt
Mailing Address 118 S. 21st St #1220.		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Philadelphia	State PA	Zip Code 19103
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4234403
Name of Employer: None		Amount of Each Receipt this Period
Occupation: Retired		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="220.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Carolita C. Phillips		Date of Receipt
Mailing Address 2437 61st Ave SE		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City Mercer Island	State WA	Zip Code 98040
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4237996
Name of Employer: None		Amount of Each Receipt this Period
Occupation: Retired		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="400.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1281 OF 2648
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Harry L. Phillips , Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 10330 NE 137th Pl

City Kirkland	State WA	Zip Code 98034
------------------	-------------	-------------------

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 ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	04	/	2014

Transaction ID : 4232263

Amount of Each Receipt this Period
300.00

B. Ms. Marjorie Phillips
Full Name (Last, First, Middle Initial)

Mailing Address 71 Hawthorne Way

City Hartsdale	State NY	Zip Code 10530
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Homemaker
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	19	/	2014

Transaction ID : 4238292

Amount of Each Receipt this Period
200.00

C. Ms. Sheila Phipps
Full Name (Last, First, Middle Initial)

Mailing Address 1058 Joe Shoemaker Road

City Vilas	State NC	Zip Code 28692
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FEC ID number of contributing federal political committee. **C**

Name of Employer Appalachian State University	Occupation Education
--	-------------------------

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
12	/	06	/	2014

Transaction ID : 4232537

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	525.00
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 1282 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carole F. Phipps		Date of Receipt M M / D D / Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230707
Mailing Address 102 Altura Vista		Amount of Each Receipt this Period 50.00
City Los Gatos	State CA	Zip Code 95032
FEC ID number of contributing federal political committee. C		
Name of Employer San Jose State University	Occupation Lecturer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Gerald A. Phipps		Date of Receipt M M / D D / Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234137
Mailing Address 8000 SW 56 Avenue		Amount of Each Receipt this Period 10.00
City Gainesville	State FL	Zip Code 32608
FEC ID number of contributing federal political committee. C		
Name of Employer University Of Florida	Occupation Pathologist's Assistant (Pa)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Ms. Donna Picard		Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236693
Mailing Address 10 Stonegate		Amount of Each Receipt this Period 25.00
City Irvine	State CA	Zip Code 92602
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 1283 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patricia R. Pickford
 Full Name (Last, First, Middle Initial)
 Mailing Address 262 E Barstow Ave Apt D
 City Fresno State CA Zip Code 93710
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231170
 Amount of Each Receipt this Period
 100.00

B. Beverly Pickrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 4826 E. Blanche Drive
 City Scottsdale State AZ Zip Code 85254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228074
 Amount of Each Receipt this Period
 20.00

C. Beverly Pickrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 4826 E. Blanche Drive
 City Scottsdale State AZ Zip Code 85254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240732
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 1284 OF 2648
	<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)
EMILY's List

A. Ms. Patrice Pierce
Full Name (Last, First, Middle Initial)
Mailing Address 3780 Seramonte Dr
City Highlands Ranch State CO Zip Code 80129
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 26 / 2014
Transaction ID : 4228076
Amount of Each Receipt this Period
40.00

B. Ms. Patrice Pierce
Full Name (Last, First, Middle Initial)
Mailing Address 3780 Seramonte Dr
City Highlands Ranch State CO Zip Code 80129
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240803
Amount of Each Receipt this Period
40.00

C. Ms. Glenda Pierron
Full Name (Last, First, Middle Initial)
Mailing Address 13076 Smoketree Pl.
City Chino State CA Zip Code 91710
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 ▼ 218.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 26 / 2014
Transaction ID : 4227725
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
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 1285 OF 2648
	<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)
EMILY's List

A. Karen Pierz
Full Name (Last, First, Middle Initial)

Mailing Address 1950 Sprucewood Ct

City Naperville State IL Zip Code 60565

FEC ID number of contributing federal political committee. **C**

Name of Employer Naperville School District 203 Occupation Physical Therapist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
12 / 06 / 2014
Transaction ID : 4232502

Amount of Each Receipt this Period
30.00

B. Ms. Linda K Pietroburgo
Full Name (Last, First, Middle Initial)

Mailing Address 435 Twin Creek Road

City Creve Coeur State MO Zip Code 63141

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
11 / 28 / 2014
Transaction ID : 4229185

Amount of Each Receipt this Period
250.00

C. Mr. Edward D. Pillar
Full Name (Last, First, Middle Initial)

Mailing Address 668 Rochdale Cir.

City Lombard State IL Zip Code 60148

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 / 26 / 2014
Transaction ID : 4227766

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.00

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 1286 OF 2648
	<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)
EMILY's List

A. Ms. Ellen Pillard
Full Name (Last, First, Middle Initial)
Mailing Address 541 Sunnyside Dr.
City Reno State NV Zip Code 89503
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 ▼ 530.00

Date of Receipt 11 / 28 / 2014
Transaction ID : 4229186
Amount of Each Receipt this Period 35.00

B. Ms. Ellen Pillard
Full Name (Last, First, Middle Initial)
Mailing Address 541 Sunnyside Dr.
City Reno State NV Zip Code 89503
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 ▼ 530.00

Date of Receipt 12 / 28 / 2014
Transaction ID : 4242276
Amount of Each Receipt this Period 35.00

C. Mr. Laurence Pimentel
Full Name (Last, First, Middle Initial)
Mailing Address 3305 Riverwell Court
City Fort Worth State TX Zip Code 76116
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 ▼ 260.00

Date of Receipt 12 / 12 / 2014
Transaction ID : 4236008
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 1287 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Amy Pines		Date of Receipt
Mailing Address 5 Pequot Trl		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4228077
Westport	CT	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="20.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Amy Pines		Date of Receipt
Mailing Address 5 Pequot Trl		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4240730
Westport	CT	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="20.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. David Pinkow		Date of Receipt
Mailing Address 2815 Heidelberg Dr.		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4228078
Boulder	CO	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="25.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="65.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1288 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Susan Piper
Full Name (Last, First, Middle Initial)
Mailing Address 3165 SW 82nd Ave

City Portland	State OR	Zip Code 97225
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229191

Amount of Each Receipt this Period
 15.00

B. Susan Piper
Full Name (Last, First, Middle Initial)
Mailing Address 3165 SW 82nd Ave

City Portland	State OR	Zip Code 97225
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241540

Amount of Each Receipt this Period
 15.00

C. Ms. Paula Pippin
Full Name (Last, First, Middle Initial)
Mailing Address 23257 Willow Creek Ln

City California	State MD	Zip Code 20619
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232674

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 1289 OF 2648
	(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)
EMILY's List

A. Oriol Pi-Sunyer
Full Name (Last, First, Middle Initial)

Mailing Address 63 Pine Grv

City Amherst State MA Zip Code 01002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
12 / 22 / 2014
Transaction ID : 4238311

Amount of Each Receipt this Period
30.00

B. Charles Pittman
Full Name (Last, First, Middle Initial)

Mailing Address 4117 West Regency Court

City Vero Beach State FL Zip Code 32967

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 ▼
363.00

Date of Receipt
12 / 31 / 2014
Transaction ID : 4243478

Amount of Each Receipt this Period
25.00

C. Charles Pittman
Full Name (Last, First, Middle Initial)

Mailing Address 4117 West Regency Court

City Vero Beach State FL Zip Code 32967

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 ▼
363.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230712

Amount of Each Receipt this Period
38.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 93.00

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 1290 OF 2648
	<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)
EMILY's List

A. Dawn Pittman
Full Name (Last, First, Middle Initial)

Mailing Address 2014 Walgrove Ave

City Los Angeles State CA Zip Code 90066

FEC ID number of contributing federal political committee. **C**

Name of Employer Toyota Motor Sales Usa, Inc. Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4242763

Amount of Each Receipt this Period
250.00

B. Bette Plant
Full Name (Last, First, Middle Initial)

Mailing Address 419 Azaleadell

City Houston State TX Zip Code 77018

FEC ID number of contributing federal political committee. **C**

Name of Employer Fleming, Nolen & Jez, Llp Occupation Word Processing Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.16**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229836

Amount of Each Receipt this Period
20.00

C. Bette Plant
Full Name (Last, First, Middle Initial)

Mailing Address 419 Azaleadell

City Houston State TX Zip Code 77018

FEC ID number of contributing federal political committee. **C**

Name of Employer Fleming, Nolen & Jez, Llp Occupation Word Processing Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.16**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240068

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **290.00**

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 1291 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Morgan P. Plant		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014
Mailing Address 322 S West St		Transaction ID : 4228081
City Carlisle	State PA	Zip Code 17013
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 15.00
Name of Employer Self	Occupation Lobbyist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00	

Full Name (Last, First, Middle Initial) B. Ms. Morgan P. Plant		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014
Mailing Address 322 S West St		Transaction ID : 4232856
City Carlisle	State PA	Zip Code 17013
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 20.00
Name of Employer Self	Occupation Lobbyist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00	

Full Name (Last, First, Middle Initial) C. Ms. Judith E. Plaskow		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014
Mailing Address 779 Riverside Dr Apt A42		Transaction ID : 4232658
City New York	State NY	Zip Code 10032
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00
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 ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 1292 OF 2648
	<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)
EMILY's List

A. Mr. Ben Platnik
 Full Name (Last, First, Middle Initial)
 Mailing Address 3987 Santa Nella Pl
 City San Diego State CA Zip Code 92130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 473.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243112
 Amount of Each Receipt this Period
 105.00

B. Ms. Leslie Platt
 Full Name (Last, First, Middle Initial)
 Mailing Address 548 Christopher Ln
 City Chester State SC Zip Code 29706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Sc Dept Of Disabilities And Special Ne Psychologist
 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
 12 / 15 / 2014
Transaction ID : 4236394
 Amount of Each Receipt this Period
 225.00

C. Ms. Charlotte Plotnick
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 652
 City Holmes State NY Zip Code 12531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236540
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	580.00
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 1293 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Ted Plott		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2014 Transaction ID : 4232482
Mailing Address 907 N. Washington Street		Amount of Each Receipt this Period 20.00
City Shamokin	State PA	Zip Code 17872
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. Dr. Thomas Plum		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232829
Mailing Address PO Box 44610		Amount of Each Receipt this Period 20.00
City Kamuela	State HI	Zip Code 96743
FEC ID number of contributing federal political committee. C		
Name of Employer Plum Hall	Occupation programmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Full Name (Last, First, Middle Initial) C. Ms. Joyce M. Plummer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4231496
Mailing Address 2001 W Rudasill Rd Apt 1302		Amount of Each Receipt this Period 100.00
City Tucson	State AZ	Zip Code 85704
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 1294 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet Silver Podell		Date of Receipt
Mailing Address 1351 Harker Ave.		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Palo Alto	CA	94301
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4229634
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Kathleen M. Podolsky		Date of Receipt
Mailing Address 300 Davey Glen Rd. Apt. 3925		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Belmont	CA	94002
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4227772
Name of Employer	Occupation	Amount of Each Receipt this Period
Self Employed	Photographer	<input type="text" value="89.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="414.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Margaret Poethig		Date of Receipt
Mailing Address 2322 North Upton Street		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Arlington	VA	22207
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4241656
Name of Employer	Occupation	Amount of Each Receipt this Period
U.S. Department Of Hud	Program Advisor	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="330.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="339.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1295 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith Poffenbarger		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237720
Mailing Address 2390 E Bluejay Bluff		Amount of Each Receipt this Period 15.00
City Green Valley	State AZ	Zip Code 85614
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 ▼ 203.00	

Full Name (Last, First, Middle Initial) B. Ms. Teresa A. Poirier		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242282
Mailing Address 1709 Silverwood Drive		Amount of Each Receipt this Period 50.00
City Martinez	State CA	Zip Code 94553
FEC ID number of contributing federal political committee. C		
Name of Employer John Muir Med. Center	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Paul Polasky		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230073
Mailing Address 2850 E Nunneley Rd		Amount of Each Receipt this Period 15.00
City Gilbert	State AZ	Zip Code 85296
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 ▼ 780.00	

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 1296 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Paul Polasky		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4240070
Mailing Address 2850 E Nunneley Rd		Amount of Each Receipt this Period 780.00
City Gilbert	State AZ	Zip Code 85296
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 ▼ 780.00	

Full Name (Last, First, Middle Initial) B. Paul Polasky		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232004
Mailing Address 2850 E Nunneley Rd		Amount of Each Receipt this Period 25.00
City Gilbert	State AZ	Zip Code 85296
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 ▼ 780.00	

Full Name (Last, First, Middle Initial) C. Paul Polasky		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014 Transaction ID : 4236035
Mailing Address 2850 E Nunneley Rd		Amount of Each Receipt this Period 25.00
City Gilbert	State AZ	Zip Code 85296
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 ▼ 780.00	

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 1297 OF 2648
	<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)
EMILY's List

A. Debbie Polhemus
Full Name (Last, First, Middle Initial)

Mailing Address 25 Upper Alcatraz Place

City	State	Zip Code
Mill Valley	CA	94941

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 ▼ **660.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	16	/	2014

Transaction ID : 4237143

Amount of Each Receipt this Period

50.00

B. Mr. Peter A. Politzer
Full Name (Last, First, Middle Initial)

Mailing Address 3121 3rd Ave.

City	State	Zip Code
San Diego	CA	92103

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230714

Amount of Each Receipt this Period

200.00

C. Mary C. Polonowski
Full Name (Last, First, Middle Initial)

Mailing Address 6071 Sunfish Lk.Neave.

City	State	Zip Code
Rockford	MI	49341

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Michigan Dept. Of Ed.	Contract Monitor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	12	/	2014

Transaction ID : 4236019

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional).....▶	280.00
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 1299 OF 2648
	<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)
EMILY's List

A. Ms. Julie R. Poniowski
 Full Name (Last, First, Middle Initial)
 Mailing Address 12380 Driscoll Street NE
 City Belding State MI Zip Code 48809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Eurest Dining Occupation Foodservice
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2014
Transaction ID : 4240275
 Amount of Each Receipt this Period
 100.00

B. Karen Poortvliet
 Full Name (Last, First, Middle Initial)
 Mailing Address 144 Melbourne Ave SE
 City Minneapolis State MN Zip Code 55414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Smith Hanley Occupation Clinical Research Professional
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231889
 Amount of Each Receipt this Period
 15.00

C. Karen Poortvliet
 Full Name (Last, First, Middle Initial)
 Mailing Address 144 Melbourne Ave SE
 City Minneapolis State MN Zip Code 55414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Smith Hanley Occupation Clinical Research Professional
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229196
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 1300 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Karen Poortvliet
 Full Name (Last, First, Middle Initial)
 Mailing Address 144 Melbourne Ave SE
 City State Zip Code
 Minneapolis MN 55414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Smith Hanley Clinical Research Professional
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242284
 Amount of Each Receipt this Period
 25.00

B. Mr. Joe Pope
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 E. Kelley Road
 City State Zip Code
 Newbury Park CA 91320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4226731
 Amount of Each Receipt this Period
 25.00

C. Ms. Katharine Popenoe
 Full Name (Last, First, Middle Initial)
 Mailing Address 92 Moore St
 City State Zip Code
 Princeton NJ 08540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227482
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 1301 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Terry Poplawski		Date of Receipt
Mailing Address 4726 San Feliciano Dr.		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Woodland Hls	CA	91364
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2050.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Joan Porta		Date of Receipt
Mailing Address 12 Crescent Avenue		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Windham	ME	04062
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Migis Lodge (Self)	Innkeeper	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Joan Porta		Date of Receipt
Mailing Address 12 Crescent Avenue		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Windham	ME	04062
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Migis Lodge (Self)	Innkeeper	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1302 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Alexandra Porter		Date of Receipt
Mailing Address 301 Perkins Ln		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Lopez Island	WA	98261
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4228351
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Alexandra Porter		Date of Receipt
Mailing Address 301 Perkins Ln		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Lopez Island	WA	98261
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4241185
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. John Porter		Date of Receipt
Mailing Address 2362 Oxford # C		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cardiff	CA	92007
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4228083
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="35.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1284.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="85.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1303 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. John Porter		Date of Receipt M M / D D / Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240812
Mailing Address 2362 Oxford # C		Amount of Each Receipt this Period 60.00
City Cardiff	State CA	Zip Code 92007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
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 ▼ 1284.00	

Full Name (Last, First, Middle Initial) B. Sarah E. Porter		Date of Receipt M M / D D / Y Y Y Y Y 12 / 06 / 2014 Transaction ID : 4232553
Mailing Address 21 Lower Kimo Drive		Amount of Each Receipt this Period 10.00
City Kula	State HI	Zip Code 96790
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Self	Occupation Healing Touch Instructor And Editor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

Full Name (Last, First, Middle Initial) C. Sarah E. Porter		Date of Receipt M M / D D / Y Y Y Y Y 12 / 06 / 2014 Transaction ID : 4232554
Mailing Address 21 Lower Kimo Drive		Amount of Each Receipt this Period 15.00
City Kula	State HI	Zip Code 96790
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Self	Occupation Healing Touch Instructor And Editor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 1304 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Sarah E. Porter		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233350
Mailing Address 21 Lower Kimo Drive		Amount of Each Receipt this Period 35.00
City Kula	State HI	Zip Code 96790
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 335.00
Name of Employer Self	Occupation Healing Touch Instructor And Editor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sarah E. Porter		Date of Receipt 12 / 17 / 2014 Transaction ID : 4237945
Mailing Address 21 Lower Kimo Drive		Amount of Each Receipt this Period 50.00
City Kula	State HI	Zip Code 96790
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 335.00
Name of Employer Self	Occupation Healing Touch Instructor And Editor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Prudence S. Posner		Date of Receipt 12 / 05 / 2014 Transaction ID : 4232632
Mailing Address 39 N. Chestnut Street		Amount of Each Receipt this Period 25.00
City Beacon	State NY	Zip Code 12508
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1250.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 1305 OF 2648
	<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)
EMILY's List

A. Ms. Prudence S. Posner
Full Name (Last, First, Middle Initial)

Mailing Address 39 N. Chestnut Street

City Beacon State NY Zip Code 12508

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : 4237026

Amount of Each Receipt this Period
 25.00

B. Robert Post
Full Name (Last, First, Middle Initial)

Mailing Address 3300 Darby Rd Apt 6303

City Haverford State PA Zip Code 19041

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 ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014

Transaction ID : 4242444

Amount of Each Receipt this Period
 500.00

C. Ms. Sandra Potaski
Full Name (Last, First, Middle Initial)

Mailing Address 66 Green Dr

City Toms River State NJ Zip Code 08755

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4227531

Amount of Each Receipt this Period
 113.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 638.00

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 1306 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Patricia Poter-Efron
 Full Name (Last, First, Middle Initial)
 Mailing Address W23654 County Road U
 City Eleva State WI Zip Code 54738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238519
 Amount of Each Receipt this Period
 30.00

B. Carole Potter
 Full Name (Last, First, Middle Initial)
 Mailing Address 355 East 72nd Street Apt 9g
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Played Occupation Writer
 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
 12 / 05 / 2014
Transaction ID : 4232741
 Amount of Each Receipt this Period
 25.00

C. Terri Potts
 Full Name (Last, First, Middle Initial)
 Mailing Address 2201 N. Lakewood Blvd. #D-1866
 City Long Beach State CA Zip Code 90815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Moog Occupation Recruiter
 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
 12 / 23 / 2014
Transaction ID : 4240072
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 1307 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Rev. Robert J. Pouliot-Harden
 Full Name (Last, First, Middle Initial)
 Mailing Address 156 Colonial Ave
 City Albany State NY Zip Code 12208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Harden & Associates Occupation Sales/Nursing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 12 / 28 / 2014
Transaction ID : 4241790
 Amount of Each Receipt this Period 50.00

B. John Poundstone
 Full Name (Last, First, Middle Initial)
 Mailing Address 540 Saint Johns Pl Apt 3b
 City Brooklyn State NY Zip Code 11238
 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 ▼ 240.00

Date of Receipt 11 / 28 / 2014
Transaction ID : 4229198
 Amount of Each Receipt this Period 20.00

C. John Poundstone
 Full Name (Last, First, Middle Initial)
 Mailing Address 540 Saint Johns Pl Apt 3b
 City Brooklyn State NY Zip Code 11238
 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 ▼ 240.00

Date of Receipt 12 / 28 / 2014
Transaction ID : 4242286
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 1308 OF 2648
	<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)
EMILY's List

A. Linda Powell
Full Name (Last, First, Middle Initial)
Mailing Address 3830 University Street
City Eugene State OR Zip Code 97405
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 610.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231769
Amount of Each Receipt this Period
50.00

B. Dr. Lane H. Powell
Full Name (Last, First, Middle Initial)
Mailing Address 2100 Montreat Ln Apt A
City Vestavia State AL Zip Code 35216
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 ▼ 205.00

Date of Receipt
12 / 13 / 2014
Transaction ID : 4236328
Amount of Each Receipt this Period
20.00

C. Dr. Barbara Powers
Full Name (Last, First, Middle Initial)
Mailing Address 12000 Rist Canyon Rd.
City Bellvue State CO Zip Code 80512
FEC ID number of contributing federal political committee. **C**
Name of Employer Colorado State Univeristy Occupation Professor/Veterinarian
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230718
Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
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 1309 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Joseph Pratt		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229200
Mailing Address 18 Yale Cir		Amount of Each Receipt this Period 10.00
City Kensington	State CA	Zip Code 94708
FEC ID number of contributing federal political committee. C		
Name of Employer Pg&E	Occupation Programmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Mr. Joseph Pratt		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233450
Mailing Address 18 Yale Cir		Amount of Each Receipt this Period 10.00
City Kensington	State CA	Zip Code 94708
FEC ID number of contributing federal political committee. C		
Name of Employer Pg&E	Occupation Programmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Mr. Joseph Pratt		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241659
Mailing Address 18 Yale Cir		Amount of Each Receipt this Period 10.00
City Kensington	State CA	Zip Code 94708
FEC ID number of contributing federal political committee. C		
Name of Employer Pg&E	Occupation Programmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 1310 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Heidi Pred

Mailing Address 7524 35th Ave SW Apt N207

City State Zip Code
Seattle WA 98126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
333.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231654

Amount of Each Receipt this Period
24.00

Full Name (Last, First, Middle Initial)
B. Ms. Nancy Preston

Mailing Address 403 Sixteenth St.

City State Zip Code
Huntington Beach CA 92648

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 ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4243011

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Ms. Nancy Preston

Mailing Address 403 Sixteenth St.

City State Zip Code
Huntington Beach CA 92648

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 ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4243010

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 49.00

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 1311 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Philip Preston

Mailing Address PO Box 573

City Ashland State NH Zip Code 03217

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238842

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. Betty Ann Prestriedge

Mailing Address 156 Bellhurst

City Meridianville State AL Zip Code 35759

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 ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230101

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Betty Ann Prestriedge

Mailing Address 156 Bellhurst

City Meridianville State AL Zip Code 35759

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 ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240727

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 1312 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Mary N. Preyer

Mailing Address 1010 Waltham St Apt 17

City Lexington State MA Zip Code 02421

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
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232378

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Mr. Robert Preyer

Mailing Address 1010 Waltham St Apt 17

City Lexington State MA Zip Code 02421

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 ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227459

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
C. Mr. Mason Crocker Price

Mailing Address 3774 Sage Way

City Oceanside State CA Zip Code 92057

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229201

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **210.00**

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 1313 OF 2648
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Mason Crocker Price
Full Name (Last, First, Middle Initial)
Mailing Address 3774 Sage Way
City Oceanside State CA Zip Code 92057
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt
12 / 12 / 2014
Transaction ID : 4235768
Amount of Each Receipt this Period
10.00

B. Mr. Mason Crocker Price
Full Name (Last, First, Middle Initial)
Mailing Address 3774 Sage Way
City Oceanside State CA Zip Code 92057
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4241542
Amount of Each Receipt this Period
10.00

C. Ms. Charlotte A. Price
Full Name (Last, First, Middle Initial)
Mailing Address 25 Thornton Way Apt. 221
City Brunswick State ME Zip Code 04011
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 ▼ 300.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232750
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 1314 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. M. Gail Price , Ph.D.

Mailing Address 484 Lake Park Ave. #661

City State Zip Code
Oakland CA 94610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4243104

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ms. Kay W. Price

Mailing Address 102 Roan Cir

City State Zip Code
Universal City TX 78148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Employed Psychotherapist

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
 12 / 08 / 2014
Transaction ID : 4233067

Amount of Each Receipt this Period
125.00

Full Name (Last, First, Middle Initial)
C. Mr. Robert E. Pries

Mailing Address 1089 Lake Washington Blvd. N. Apt.

City State Zip Code
Renton WA 98056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230720

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 475.00

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 1315 OF 2648
	<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)
EMILY's List

A. Mr. Donald Priest
Full Name (Last, First, Middle Initial)
Mailing Address 11054 Botsford Ln
City Petoskey State MI Zip Code 49770
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 ▼ 240.00

Date of Receipt
12 / 14 / 2014
Transaction ID : 4235577
Amount of Each Receipt this Period
15.00

B. Mr. Donald Priest
Full Name (Last, First, Middle Initial)
Mailing Address 11054 Botsford Ln
City Petoskey State MI Zip Code 49770
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 ▼ 240.00

Date of Receipt
12 / 27 / 2014
Transaction ID : 4240999
Amount of Each Receipt this Period
15.00

C. Alison Prioleau
Full Name (Last, First, Middle Initial)
Mailing Address 4040 N Kedzie Ave Ste 4
City Chicago State IL Zip Code 60618
FEC ID number of contributing federal political committee. **C**
Name of Employer Worldcan Conferences Occupation Conference Organizer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
11 / 25 / 2014
Transaction ID : 4229695
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 1316 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Alison Prioleau		Date of Receipt 12 / 26 / 2014 Transaction ID : 4240754
Mailing Address 4040 N Kedzie Ave Ste 4		Amount of Each Receipt this Period 20.00
City Chicago	State IL	Zip Code 60618
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 260.00
Name of Employer Worldcan Conferences	Occupation Conference Organizer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Claire B.M. Proffitt		Date of Receipt 12 / 17 / 2014 Transaction ID : 4237999
Mailing Address 12400 Piney Glen Ln		Amount of Each Receipt this Period 50.00
City Potomac	State MD	Zip Code 20854
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 500.00
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Jean S. Prokopow		Date of Receipt 12 / 29 / 2014 Transaction ID : 4242677
Mailing Address 312 Bentley Dr		Amount of Each Receipt this Period 300.00
City Naples	State FL	Zip Code 34110
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 300.00
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	370.00
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 1317 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mary Protheroe
 Full Name (Last, First, Middle Initial)
 Mailing Address 44-519 Kaneohe Bay Drive
 City Kaneohe State HI Zip Code 96744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229202
 Amount of Each Receipt this Period
 100.00

B. Mary Protheroe
 Full Name (Last, First, Middle Initial)
 Mailing Address 44-519 Kaneohe Bay Drive
 City Kaneohe State HI Zip Code 96744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241543
 Amount of Each Receipt this Period
 100.00

C. RB Pruitt
 Full Name (Last, First, Middle Initial)
 Mailing Address 81 Dennett St.
 City Portsmouth State NH Zip Code 03801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4235078
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional).....▶	240.00
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 1318 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Kathryn Pryor

Mailing Address 1607 Claremont Avenue

City Richmond	State VA	Zip Code 23227
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Virginia Poverty Law Center	Occupation Lawyer
---	----------------------

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
 11 / 26 / 2014
Transaction ID : 4228084

Amount of Each Receipt this Period
80.00

Full Name (Last, First, Middle Initial)
B. Ms. Sallie S. Pullano

Mailing Address 1532 Herlong Court

City Rock Hill	State SC	Zip Code 29732
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233695

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Ms. Frances Purdy

Mailing Address 104 Falls Grove Blvd Apt 3408

City Rockville	State MD	Zip Code 20850
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer National Federation Of Families For Ch	Occupation Administrator
--	-----------------------------

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
 12 / 05 / 2014
Transaction ID : 4232784

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 1319 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Michael Putman		Date of Receipt 12 / 01 / 2014 Transaction ID : 4230721
Mailing Address 120 E. Edgewood Pl.		Amount of Each Receipt this Period 250.00
City San Antonio	State TX	Zip Code 78209
FEC ID number of contributing federal political committee. C	Name of Employer Putman & Putman Inc	Occupation Lawyer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Steve Putnam		Date of Receipt 11 / 25 / 2014 Transaction ID : 4227550
Mailing Address PO Box 1455		Amount of Each Receipt this Period 50.00
City Yarmouth	State ME	Zip Code 04096
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 ▼ 265.00	

Full Name (Last, First, Middle Initial) C. Amanda M. Putnam		Date of Receipt 12 / 19 / 2014 Transaction ID : 4238844
Mailing Address 700 Devon Pl		Amount of Each Receipt this Period 25.00
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C	Name of Employer Requested	Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional).....▶	325.00
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 1320 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Carole Quadrozzi
 Full Name (Last, First, Middle Initial)
 Mailing Address 56 Bellevue St.
 City Mount Clemens State MI Zip Code 48043
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236447
 Amount of Each Receipt this Period
 100.00

B. Jim Quinn
 Full Name (Last, First, Middle Initial)
 Mailing Address 16306 NE 81st Street
 City Vancouver State WA Zip Code 98682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 313.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231390
 Amount of Each Receipt this Period
 3.00

C. Jim Quinn
 Full Name (Last, First, Middle Initial)
 Mailing Address 16306 NE 81st Street
 City Vancouver State WA Zip Code 98682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 313.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233418
 Amount of Each Receipt this Period
 3.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 106.00
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 1321 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jim Quinn		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234159
Mailing Address 16306 NE 81st Street		Amount of Each Receipt this Period 3.00
City Vancouver	State WA	Zip Code 98682
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 313.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 313.00	

Full Name (Last, First, Middle Initial) B. Jim Quinn		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2014 Transaction ID : 4240998
Mailing Address 16306 NE 81st Street		Amount of Each Receipt this Period 3.00
City Vancouver	State WA	Zip Code 98682
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 313.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 313.00	

Full Name (Last, First, Middle Initial) C. Mr. William Quinn		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2014 Transaction ID : 4232439
Mailing Address 137 Wendy Hill Rd. #302		Amount of Each Receipt this Period 20.00
City Front Royal	State VA	Zip Code 22630
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
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 ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	26.00
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 1322 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Susan Quinn
 Full Name (Last, First, Middle Initial)
 Mailing Address 4131 Lymer Dr.
 City San Diego State CA Zip Code 92116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation self-employed psychotherapist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **325.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227587
 Amount of Each Receipt this Period
25.00

B. Ms. Deborah Hardin Quirk
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1142
 City Hastings State NE Zip Code 68902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Quirk Land & Cattle Co. Occupation Clerk
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233849
 Amount of Each Receipt this Period
150.00

C. Ms. Renee Rabb
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 151297
 City Austin State TX Zip Code 78715
 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 **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236695
 Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....	195.00
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 1323 OF 2648
	<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	

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)
EMILY's List

A. Judith J. Rader
Full Name (Last, First, Middle Initial)

Mailing Address 151 Wintergreen Street

City Brea State CA Zip Code 92821

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 4229203

Amount of Each Receipt this Period
25.00

B. Judith J. Rader
Full Name (Last, First, Middle Initial)

Mailing Address 151 Wintergreen Street

City Brea State CA Zip Code 92821

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014

Transaction ID : 4242288

Amount of Each Receipt this Period
25.00

C. Mr. William Rader
Full Name (Last, First, Middle Initial)

Mailing Address 316 River Road

City Dauphin State PA Zip Code 17018

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2014

Transaction ID : 4236329

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **65.00**

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 1324 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. William Rader		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014
Mailing Address 316 River Road		Transaction ID : 4240075
City Dauphin	State PA	Zip Code 17018
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer None	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

Full Name (Last, First, Middle Initial) B. Susan Radgoski		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014
Mailing Address 112 Borton Avenue		Transaction ID : 4232891
City Voorhees	State NJ	Zip Code 08043
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer Secure Title Of Nj	Occupation Small Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Helen Radtke		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2014
Mailing Address 611 Glenn St		Transaction ID : 4239445
City Reed City	State MI	Zip Code 49677
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
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 ▼ 310.00	

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 1325 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Zoe Rae

Mailing Address 11600 Academy Rd NE Apt 615

City Albuquerque	State NM	Zip Code 87111
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229206

Amount of Each Receipt this Period
51.00

Full Name (Last, First, Middle Initial)
B. Cathie Ragovin

Mailing Address 185 Newton Street

City Weston	State MA	Zip Code 02493
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Physician
--------------------------	-------------------------

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
 12 / 28 / 2014
Transaction ID : 4241632

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Mr. David Ragozin

Mailing Address 2919 E Howell St

City Seattle	State WA	Zip Code 98122
-----------------	-------------	-------------------

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 ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231730

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	311.00
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 1326 OF 2648
	<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)
EMILY's List

A. Mr. David Ragozin
Full Name (Last, First, Middle Initial)

Mailing Address 2919 E Howell St

City State Zip Code
Seattle WA 98122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2014

Transaction ID : 4237094

Amount of Each Receipt this Period
15.00

B. Homer Ragsdale
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4313

City State Zip Code
Orange CA 92863

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 4229207

Amount of Each Receipt this Period
25.00

C. Tomas Rahal
Full Name (Last, First, Middle Initial)

Mailing Address 404 Commerce Street

City State Zip Code
Charlottesville VA 22903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Chef

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2014

Transaction ID : 4239320

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 1327 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Prof. Susana Raij
 Full Name (Last, First, Middle Initial)
 Mailing Address 1000 Venetian Way Apt 1603
 City Miami Beach State FL Zip Code 33139
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232110
 Amount of Each Receipt this Period
 50.00

B. Robert M. Railey
 Full Name (Last, First, Middle Initial)
 Mailing Address 3029 Island Beach Rd
 City Marquette State MI Zip Code 49855
 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 ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231391
 Amount of Each Receipt this Period
 50.00

C. Ms. Beverly Railsback
 Full Name (Last, First, Middle Initial)
 Mailing Address 103 N. Franklin Street
 City Lambertville State NJ Zip Code 08530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231632
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 1328 OF 2648
	<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)
EMILY's List

A. Ms. Dorothy Raizman
Full Name (Last, First, Middle Initial)
Mailing Address 144 Kline Road

City Ligonier	State PA	Zip Code 15658
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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 ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4229815

Amount of Each Receipt this Period
75.00

B. Ms. Dorothy Raizman
Full Name (Last, First, Middle Initial)
Mailing Address 144 Kline Road

City Ligonier	State PA	Zip Code 15658
------------------	-------------	-------------------

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 ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240844

Amount of Each Receipt this Period
75.00

C. Mr. Donald G. Ramras
Full Name (Last, First, Middle Initial)
Mailing Address 4248 Karensue Ave.

City San Diego	State CA	Zip Code 92122
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FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230724

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional).....	375.00
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 1329 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Charles Ramsey		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243289
Mailing Address 9817 Circle Drive Lot 342		Amount of Each Receipt this Period 50.00
City Austin State TX Zip Code 78736	FEC ID number of contributing federal political committee. C	
Name of Employer Level3 Occupation Telecommunications	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00

Full Name (Last, First, Middle Initial) B. Dr. Stephen Ramseyer		Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230725
Mailing Address 64 Westbury Ct		Amount of Each Receipt this Period 100.00
City Clifton Park State NY Zip Code 12065	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

Full Name (Last, First, Middle Initial) C. Ms. Joanna Rankin		Date of Receipt M M / D D / Y Y Y Y 11 / 30 / 2014 Transaction ID : 4229630
Mailing Address 23 East Village Drive		Amount of Each Receipt this Period 250.00
City Burlington State VT Zip Code 05401	FEC ID number of contributing federal political committee. C	
Name of Employer Uvm Occupation Professor	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 1330 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Joanna Rankin		Date of Receipt
Mailing Address 23 East Village Drive		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Burlington	VT	05401
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4231849
Name of Employer	Occupation	Amount of Each Receipt this Period
Uvm	Professor	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3500.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Joanna Rankin		Date of Receipt
Mailing Address 23 East Village Drive		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Burlington	VT	05401
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4241653
Name of Employer	Occupation	Amount of Each Receipt this Period
Uvm	Professor	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3500.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Emily F. Ransom		Date of Receipt
Mailing Address 1850 Alice Street, Apt 812		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Oakland	CA	94612
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4232696
Name of Employer	Occupation	Amount of Each Receipt this Period
Requested	Requested	<input type="text" value="17.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="215.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="517.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1331 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Isabelle Rapin		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237027
Mailing Address 1843 Tenbroeck Ave		Amount of Each Receipt this Period 1000.00
City Bronx	State NY	
Zip Code 10461		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Ms. Patricia Rapoport		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 12 / 2014 Transaction ID : 4235323
Mailing Address 5529 Gentry Ln		Amount of Each Receipt this Period 500.00
City Williamsburg	State VA	
Zip Code 23188		Aggregate Year-to-Date ▼ 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Artist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Bryna Rapp		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 06 / 2014 Transaction ID : 4232442
Mailing Address 6819 Morrow Mill Road		Amount of Each Receipt this Period 50.00
City Chapel Hill	State NC	
Zip Code 27516		Aggregate Year-to-Date ▼ 480.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Architect	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00		

SUBTOTAL of Receipts This Page (optional).....▶	1550.00
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 1332 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Grabel Rappaport		Date of Receipt
Mailing Address 257 Oakland Ave		<input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City Staten Island	State NY	Zip Code 10310
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4229513
Name of Employer Self		Amount of Each Receipt this Period
Occupation Artist		<input type="text" value="35.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="290.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Susan Grabel Rappaport		Date of Receipt
Mailing Address 257 Oakland Ave		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City Staten Island	State NY	Zip Code 10310
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4242778
Name of Employer Self		Amount of Each Receipt this Period
Occupation Artist		<input type="text" value="35.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="290.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Ann G. Rappoport		Date of Receipt
Mailing Address 17053 Aries Ct		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Anchorage	State AK	Zip Code 99516
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4228087
Name of Employer The Nature Conservancy		Amount of Each Receipt this Period
Occupation Director Of Conservation		<input type="text" value="12.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="396.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="82.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1333 OF 2648
	<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)
EMILY's List

A. Thue O. Rasmussen
Full Name (Last, First, Middle Initial)

Mailing Address 1666 Coffman St Apt 219

City Saint Paul	State MN	Zip Code 55108
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	17	/	2014

Transaction ID : 4237557

Amount of Each Receipt this Period

8.00

B. Thue O. Rasmussen
Full Name (Last, First, Middle Initial)

Mailing Address 1666 Coffman St Apt 219

City Saint Paul	State MN	Zip Code 55108
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	30	/	2014

Transaction ID : 4242992

Amount of Each Receipt this Period

15.00

c. Thue O. Rasmussen
Full Name (Last, First, Middle Initial)

Mailing Address 1666 Coffman St Apt 219

City Saint Paul	State MN	Zip Code 55108
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	15	/	2014

Transaction ID : 4236870

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional).....▶	58.00
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 1334 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Susan Rasmussen

Mailing Address 13103 Bradford Dr

City State Zip Code
Grass Valley CA 95945

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 ▼
235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : 4239675

Amount of Each Receipt this Period
60.00

Full Name (Last, First, Middle Initial)
B. Susan Rasmussen

Mailing Address 13103 Bradford Dr

City State Zip Code
Grass Valley CA 95945

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 ▼
235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238854

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Marilyn Ratliff

Mailing Address 41 Romerly Rd.
Suite 304

City State Zip Code
Savannah GA 31411

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
 12 / 22 / 2014
Transaction ID : 4238351

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 410.00

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 1335 OF 2648
	<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)
EMILY's List

A. Ms. Marjorie L. Ratner
Full Name (Last, First, Middle Initial)

Mailing Address 2312 Green Meadows Way

City Ashland State OR Zip Code 97520

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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014

Transaction ID : 4233705

Amount of Each Receipt this Period
 35.00

B. Ms. Barbara D. Rau
Full Name (Last, First, Middle Initial)

Mailing Address 145 E Bluff

City Harbor Springs State MI Zip Code 49740

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4229212

Amount of Each Receipt this Period
 10.00

C. Ms. Barbara D. Rau
Full Name (Last, First, Middle Initial)

Mailing Address 145 E Bluff

City Harbor Springs State MI Zip Code 49740

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4242291

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 1336 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Marie S. Rautenberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Overlook Apt. 550
 City Port Washington State NY Zip Code 11050
 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 ▼ **775.00**

Date of Receipt **12 / 29 / 2014**
Transaction ID : 4242539
 Amount of Each Receipt this Period **150.00**

B. Ms. Ellen L. Rautenberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 173 W 78TH St., Apt. 15E
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Public Health Solutions Occupation Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 25 / 2014**
Transaction ID : 4227600
 Amount of Each Receipt this Period **250.00**

C. Ms. Josephine Rawlings
 Full Name (Last, First, Middle Initial)
 Mailing Address 2238 2nd St.
 City Wyandotte State MI Zip Code 48192
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **12 / 01 / 2014**
Transaction ID : 4230727
 Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **500.00**
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 1337 OF 2648
	<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)
EMILY's List

A. Ms. Margaret Ray
Full Name (Last, First, Middle Initial)

Mailing Address 315 SW Walnut

City Pullman State WA Zip Code 99163

FEC ID number of contributing federal political committee. **C**

Name of Employer Garfield United Methodist Church Occupation Pastor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : 4238856

Amount of Each Receipt this Period
75.00

B. Ronald Ray
Full Name (Last, First, Middle Initial)

Mailing Address 26 Birchview Dr

City Piscataway State NJ Zip Code 08854

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 ▼ **355.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014

Transaction ID : 4234256

Amount of Each Receipt this Period
30.00

C. Ms. Carol Ray
Full Name (Last, First, Middle Initial)

Mailing Address 35 Willow Way

City Washington State IA Zip Code 52353

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014

Transaction ID : 4233642

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **120.00**

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 1338 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Sandra K. Rayburn		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2014 Transaction ID : 4241009
Mailing Address 3998 Wolcott Circle		Amount of Each Receipt this Period 20.00
City Atlanta	State GA	Zip Code 30340
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Mr. Peter R. Raymond		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236136
Mailing Address 9 Beverlee Dr.		Amount of Each Receipt this Period 250.00
City Nashua	State NH	Zip Code 03064
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Valerie M. Raymond		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227449
Mailing Address 510 E 86 St		Amount of Each Receipt this Period 100.00
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	370.00
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 1339 OF 2648
	<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)
EMILY's List

A. Charlotte Raynor
Full Name (Last, First, Middle Initial)

Mailing Address 10040 E. Happy Valley Road
#223

City State Zip Code
Scottsdale AZ 85255

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014
Transaction ID : 4238857

Amount of Each Receipt this Period
18.00

B. Marion Read
Full Name (Last, First, Middle Initial)

Mailing Address 380 S Taft Ct

City State Zip Code
Louisville CO 80027

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 ▼
220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4229769

Amount of Each Receipt this Period
20.00

c. Marion Read
Full Name (Last, First, Middle Initial)

Mailing Address 380 S Taft Ct

City State Zip Code
Louisville CO 80027

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 ▼
220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4240079

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	58.00
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 1340 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol T. Rearick		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2014
Mailing Address 6154 Sundance Trail		Transaction ID : 4239114
City Brighton	State MI	Zip Code 48116
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) B. Mr. Gerald A. Rech		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014
Mailing Address 70 N. Old Cedar Circle		Transaction ID : 4236331
City The Woodlands	State TX	Zip Code 77382
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Exxon Mobil Corporation	Occupation Information Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) C. Dr. Micaela B. Reddy		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 27 / 2014
Mailing Address 1152 Northmoor Dr		Transaction ID : 4228383
City Broomfield	State CO	Zip Code 80020
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Array Biopharma	Occupation Clinical Pharmacologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional).....▶	2600.00
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 1341 OF 2648
	<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)
EMILY's List

A. Dr. Micaela B. Reddy
Full Name (Last, First, Middle Initial)

Mailing Address 1152 Northmoor Dr

City Broomfield State CO Zip Code 80020

FEC ID number of contributing federal political committee. **C**

Name of Employer Array Biopharma Occupation Clinical Pharmacologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4236731

Amount of Each Receipt this Period
 50.00

B. Dr. Micaela B. Reddy
Full Name (Last, First, Middle Initial)

Mailing Address 1152 Northmoor Dr

City Broomfield State CO Zip Code 80020

FEC ID number of contributing federal political committee. **C**

Name of Employer Array Biopharma Occupation Clinical Pharmacologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014

Transaction ID : 4241199

Amount of Each Receipt this Period
 50.00

C. Ms. Karen B. Redlener
Full Name (Last, First, Middle Initial)

Mailing Address 372 Central Park West,

City New York State NY Zip Code 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer Montefiore Medical Center Occupation Health Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4244827

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 1342 OF 2648
	<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)
EMILY's List

A. Ms. Karen B. Redlener
 Full Name (Last, First, Middle Initial)
 Mailing Address 372 Central Park West,
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Montefiore Medical Center Occupation Health Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228089
 Amount of Each Receipt this Period
 35.00

B. Ms. Harriet Lee Redwine
 Full Name (Last, First, Middle Initial)
 Mailing Address 1701 W Coolidge St
 City Phoenix State AZ Zip Code 85015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237303
 Amount of Each Receipt this Period
 15.00

C. Ms. Janet G. Reed
 Full Name (Last, First, Middle Initial)
 Mailing Address 4200 Jackson Ave Apt 4002
 City Austin State TX Zip Code 78731
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235303
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 1343 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Laurie Reed		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2014 Transaction ID : 4242902
Mailing Address 334 E. Winchester Rd.		Amount of Each Receipt this Period 1500.00
City Libertyville	State IL	Zip Code 60048
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 ▼ 4900.00	

Full Name (Last, First, Middle Initial) B. Mr. David M Reeves-Brown		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236728
Mailing Address 17 Drake St		Amount of Each Receipt this Period 50.00
City Asheville	State NC	Zip Code 28806
FEC ID number of contributing federal political committee. C	Name of Employer N/A	Occupation N/A
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) c. Linda Rehberg		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4228090
Mailing Address 16205 Ramblewood Drive		Amount of Each Receipt this Period 100.00
City Springfield	State NE	Zip Code 68059
FEC ID number of contributing federal political committee. C	Name of Employer None	Occupation None
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	

SUBTOTAL of Receipts This Page (optional).....▶	1650.00
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 1344 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Linda Rehberg		Date of Receipt M M / D D / Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240856
Mailing Address 16205 Ramblewood Drive		Amount of Each Receipt this Period 100.00
City Springfield	State NE	Zip Code 68059
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	

Full Name (Last, First, Middle Initial) B. Debora Reher		Date of Receipt M M / D D / Y Y Y Y Y 12 / 14 / 2014 Transaction ID : 4235471
Mailing Address 6705 S Santa Fe Dr Lot 47		Amount of Each Receipt this Period 25.00
City Littleton	State CO	Zip Code 80120
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Tax Practitioner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Dorothy Rehill		Date of Receipt M M / D D / Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233238
Mailing Address 21 Deep Hollow Ln. N.		Amount of Each Receipt this Period 20.00
City Columbus	State NJ	Zip Code 08022
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 ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 1345 OF 2648
	<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)
EMILY's List

A. Ms. Diane Rehner
Full Name (Last, First, Middle Initial)
Mailing Address 310 Smith St.
City Fort Collins State CO Zip Code 80524
FEC ID number of contributing federal political committee. **C**
Name of Employer Unknown Occupation Unknown
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
12 / 17 / 2014
Transaction ID : 4237791
Amount of Each Receipt this Period
600.00

B. Mr. Theodore Reich
Full Name (Last, First, Middle Initial)
Mailing Address 2546 E. 13th St., Apt. A15
City Brooklyn State NY Zip Code 11235
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 ▼ 451.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239515
Amount of Each Receipt this Period
113.00

C. Mr. John Reichel
Full Name (Last, First, Middle Initial)
Mailing Address 1060 Congress Valley Rd.
City Napa State CA Zip Code 94558
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 ▼ 300.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238859
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 273.00
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 1346 OF 2648
	<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)
EMILY's List

A. Ms. Agnes Reid
Full Name (Last, First, Middle Initial)
Mailing Address 5276 Candy Root Ct.
City Columbia State MD Zip Code 21045
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 ▼ 300.00

Date of Receipt
11 / 27 / 2014
Transaction ID : 4228338
Amount of Each Receipt this Period 25.00

B. Ms. Agnes Reid
Full Name (Last, First, Middle Initial)
Mailing Address 5276 Candy Root Ct.
City Columbia State MD Zip Code 21045
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 ▼ 300.00

Date of Receipt
12 / 27 / 2014
Transaction ID : 4241176
Amount of Each Receipt this Period 25.00

C. Panthea Reid
Full Name (Last, First, Middle Initial)
Mailing Address 294 Mount Lucas Rd.
City Princeton State NJ Zip Code 08540
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4240082
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 1347 OF 2648
	<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)
EMILY's List

A. Ms. Alice Reier
Full Name (Last, First, Middle Initial)
Mailing Address 1500 Park Ave. #302

City Emeryville	State CA	Zip Code 94608
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Medical Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1015.00	

Date of Receipt
11 / 26 / 2014
Transaction ID : **4228091**

Amount of Each Receipt this Period
15.00

B. Douglas Reilly
Full Name (Last, First, Middle Initial)
Mailing Address 504 San Nicholas Ct

City Laguna Beach	State CA	Zip Code 92651
FEC ID number of contributing federal political committee. C		
Name of Employer City Of Laguna Woods	Occupation Assistant City Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
11 / 28 / 2014
Transaction ID : **4229216**

Amount of Each Receipt this Period
50.00

C. Douglas Reilly
Full Name (Last, First, Middle Initial)
Mailing Address 504 San Nicholas Ct

City Laguna Beach	State CA	Zip Code 92651
FEC ID number of contributing federal political committee. C		
Name of Employer City Of Laguna Woods	Occupation Assistant City Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
12 / 28 / 2014
Transaction ID : **4241225**

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 1348 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jackie Reilly
 Full Name (Last, First, Middle Initial)
 Mailing Address 224 Rocking M Road
 City State Zip Code
 Kyle TX 78640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Ymca Swimming Instructor
 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
 12 / 20 / 2014
Transaction ID : 4239168
 Amount of Each Receipt this Period
 25.00

B. Ms. Kim Reimer
 Full Name (Last, First, Middle Initial)
 Mailing Address 851 Second St
 Apt. 225
 City State Zip Code
 Santa Monica CA 90403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None - Disabled With Multiple Sclerosi Former Paralegal
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 368.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233591
 Amount of Each Receipt this Period
 10.00

C. Ms. Kim Reimer
 Full Name (Last, First, Middle Initial)
 Mailing Address 851 Second St
 Apt. 225
 City State Zip Code
 Santa Monica CA 90403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None - Disabled With Multiple Sclerosi Former Paralegal
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 368.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240084
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 1349 OF 2648
	<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)
EMILY's List

A. Ms. Karen B. Reinker
Full Name (Last, First, Middle Initial)

Mailing Address 5225 Caminito Vista Lujo

City San Diego	State CA	Zip Code 92130
-------------------	-------------	-------------------

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 ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2014

Transaction ID : 4239200

Amount of Each Receipt this Period

40.00

B. Ms. Karen B. Reinker
Full Name (Last, First, Middle Initial)

Mailing Address 5225 Caminito Vista Lujo

City San Diego	State CA	Zip Code 92130
-------------------	-------------	-------------------

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 ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2014

Transaction ID : 4230201

Amount of Each Receipt this Period

15.00

C. Ms. Karen B. Reinker
Full Name (Last, First, Middle Initial)

Mailing Address 5225 Caminito Vista Lujo

City San Diego	State CA	Zip Code 92130
-------------------	-------------	-------------------

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 ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4244919

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 1350 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Diane Reiser
 Full Name (Last, First, Middle Initial)
 Mailing Address 716 East 22nd Street
 City Brooklyn State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rf Cuny Occupation Educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 12 / 18 / 2014
Transaction ID : 4238068
 Amount of Each Receipt this Period
 50.00

B. Nancy Renbarger
 Full Name (Last, First, Middle Initial)
 Mailing Address 221 Vista Bonita
 City Newbury Park State CA Zip Code 91320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Bookkeeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4233615
 Amount of Each Receipt this Period
 10.00

C. Nancy Renbarger
 Full Name (Last, First, Middle Initial)
 Mailing Address 221 Vista Bonita
 City Newbury Park State CA Zip Code 91320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Bookkeeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4238862
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 1351 OF 2648
	<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)
EMILY's List

A. Ms. Mary Rennick
Full Name (Last, First, Middle Initial)
Mailing Address 1247 Josselyn Canyon Rd
City Monterey State CA Zip Code 93940
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 ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 17 / 2014
Transaction ID : 4237434
Amount of Each Receipt this Period
100.00

B. Ms. Martha Rennie
Full Name (Last, First, Middle Initial)
Mailing Address 9 Wexford Lane
City Cromwell State CT Zip Code 06416
FEC ID number of contributing federal political committee. **C**
Name of Employer The Bridge Family Center Occupation Fundraiser
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 27 / 2014
Transaction ID : 4240969
Amount of Each Receipt this Period
50.00

C. Ms. Ann Reno
Full Name (Last, First, Middle Initial)
Mailing Address 2 Collingswood Place
City Flanders State NJ Zip Code 07836
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 316.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 15 / 2014
Transaction ID : 4236921
Amount of Each Receipt this Period
3.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 153.00
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 1352 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ann Reno		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234040
Mailing Address 2 Collingswood Place		Amount of Each Receipt this Period 10.00
City Flanders	State NJ	Zip Code 07836
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.00	

Full Name (Last, First, Middle Initial) B. Ms. Ann Reno		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238863
Mailing Address 2 Collingswood Place		Amount of Each Receipt this Period 20.00
City Flanders	State NJ	Zip Code 07836
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.00	

Full Name (Last, First, Middle Initial) C. Mr. Kenneth K. Renwick		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233707
Mailing Address 16678 Cornucopia Mine Road PO Box 190		Amount of Each Receipt this Period 35.00
City Soulsbyville	State CA	Zip Code 95372
FEC ID number of contributing federal political committee. C		
Name of Employer Tmw Indian Health Center	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional).....▶ 65.00
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 1353 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Roshan Reporter		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2014 Transaction ID : 4239270
Mailing Address 2510 Kenilworth		Amount of Each Receipt this Period 100.00
City Los Angeles	State CA	Zip Code 90039
FEC ID number of contributing federal political committee. C		
Name of Employer County Of Los Angeles	Occupation Medical Epidemiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2725.00	

Full Name (Last, First, Middle Initial) B. Ms. Elyse Resch		Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230729
Mailing Address 3001 Linda Ln.		Amount of Each Receipt this Period 75.00
City Santa Monica	State CA	Zip Code 90405
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Dietary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary Resnick		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2014 Transaction ID : 4244864
Mailing Address 5736 Emerson Ct		Amount of Each Receipt this Period 25.00
City Agoura Hills	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 1354 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jori Resnikoff
 Full Name (Last, First, Middle Initial)
 Mailing Address 61 Westbourne Terrace
 City Brookline State MA Zip Code 02446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Myself Occupation Mother
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233559
 Amount of Each Receipt this Period
 10.00

B. Ms. Ellanor Revenga
 Full Name (Last, First, Middle Initial)
 Mailing Address 2811 S Woodrow St Apt E
 City Arlington State VA Zip Code 22296
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237925
 Amount of Each Receipt this Period
 50.00

C. Ms. Ellanor Revenga
 Full Name (Last, First, Middle Initial)
 Mailing Address 2811 S Woodrow St Apt E
 City Arlington State VA Zip Code 22296
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240085
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 1355 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Sarah Reves
 Full Name (Last, First, Middle Initial)
 Mailing Address 4414 Twisted Tree Drive
 City Austin State TX Zip Code 78735
 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 ▼ 240.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4244828
 Amount of Each Receipt this Period
 200.00

B. Ms. Joanne Reynolds
 Full Name (Last, First, Middle Initial)
 Mailing Address 45 Mountain View Rd.
 City Tinmouth State VT Zip Code 05773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 12 / 12 / 2014
Transaction ID : 4235985
 Amount of Each Receipt this Period
 15.00

C. Mr. Gerald Reynolds
 Full Name (Last, First, Middle Initial)
 Mailing Address 2530 Orange Avenue
 City La Crescenta State CA Zip Code 91214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self - Consultant Occupation Qa Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 11 / 27 / 2014
Transaction ID : 4228388
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
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 1356 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Gerald Reynolds		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2014 Transaction ID : 4241200
Mailing Address 2530 Orange Avenue		Amount of Each Receipt this Period 100.00
City La Crescenta	State CA	Zip Code 91214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self - Consultant	Occupation Qa Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) B. Ms. Verna A. Rhodes		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232193
Mailing Address 26 Fleming Drive		Amount of Each Receipt this Period 50.00
City Columbia	State MO	Zip Code 65201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr. Cephus Rhodes		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230731
Mailing Address 10720 Adauto Ct.		Amount of Each Receipt this Period 75.00
City El Paso	State TX	Zip Code 79935
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
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 ▼ 275.00	

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 1357 OF 2648
	<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)
EMILY's List

A. Gino Ricciardelli
Full Name (Last, First, Middle Initial)
Mailing Address 608 Murray Hill Rd.
City Vestal State NY Zip Code 13850
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 ▼ 300.00

Date of Receipt
12 / 04 / 2014
Transaction ID : 4232248
Amount of Each Receipt this Period 50.00

B. Judith R. Rice
Full Name (Last, First, Middle Initial)
Mailing Address 530 W Devonshire Ave Spc 39
City Hemet State CA Zip Code 92543
FEC ID number of contributing federal political committee. **C**
Name of Employer Mission Hospital Occupation Nurse
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236745
Amount of Each Receipt this Period 15.00

C. Judith R. Rice
Full Name (Last, First, Middle Initial)
Mailing Address 530 W Devonshire Ave Spc 39
City Hemet State CA Zip Code 92543
FEC ID number of contributing federal political committee. **C**
Name of Employer Mission Hospital Occupation Nurse
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt
11 / 26 / 2014
Transaction ID : 4228095
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 1358 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Judith R. Rice		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240760
Mailing Address 530 W Devonshire Ave Spc 39		Amount of Each Receipt this Period 25.00
City Hemet State CA Zip Code 92543	FEC ID number of contributing federal political committee. C	
Name of Employer Mission Hospital Occupation Nurse	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00

Full Name (Last, First, Middle Initial) B. Ms. Virginia A Rice		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238865
Mailing Address 54 Whiteoaks Circle		Amount of Each Receipt this Period 40.00
City Bluffton State SC Zip Code 29910	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 ▼ 480.00

Full Name (Last, First, Middle Initial) C. Ms. Nancy K. Rice		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 29 / 2014 Transaction ID : 4242642
Mailing Address 1470 W Tienken Rd		Amount of Each Receipt this Period 100.00
City Rochester Hills State MI Zip Code 48306	FEC ID number of contributing federal political committee. C	
Name of Employer Saginaw Valley State University Occupation Consultant	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00

SUBTOTAL of Receipts This Page (optional).....▶	165.00
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 1359 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Laura Rice
 Full Name (Last, First, Middle Initial)
 Mailing Address 81 Aberdeen Avenue
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236332
 Amount of Each Receipt this Period
 100.00

B. Ms. Donna I. Rich
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Sunfish Pt
 City Greensboro State NC Zip Code 27455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rio Palenque Research Corp Occupation Environmental Chemist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229221
 Amount of Each Receipt this Period
 50.00

C. Ms. Donna I. Rich
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Sunfish Pt
 City Greensboro State NC Zip Code 27455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rio Palenque Research Corp Occupation Environmental Chemist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241311
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 1360 OF 2648
	<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)
EMILY's List

A. Ms. Barbara Richards
 Full Name (Last, First, Middle Initial)
 Mailing Address 1421 Webster St NW
 City Washington State DC Zip Code 20011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hhs Occupation Senior Health Policy Advisor
 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
 12 / 28 / 2014
Transaction ID : 4241793
 Amount of Each Receipt this Period
250.00

B. Ms. Roxanne Richards
 Full Name (Last, First, Middle Initial)
 Mailing Address 266 Beach Rd
 City Belvedere State CA Zip Code 94920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1575.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229582
 Amount of Each Receipt this Period
25.00

C. Ms. Roxanne Richards
 Full Name (Last, First, Middle Initial)
 Mailing Address 266 Beach Rd
 City Belvedere State CA Zip Code 94920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1575.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241548
 Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 1361 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Lois C. Richards
 Full Name (Last, First, Middle Initial)
 Mailing Address 5910 N. Summit Lane
 City Spokane State WA Zip Code 99212
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234332
 Amount of Each Receipt this Period
 100.00

B. Ms. Clare Richardson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3021 Mornington Drive
 City Atlanta State GA Zip Code 30327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dian Fossey Gorilla Fund International Occupation Ceo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233709
 Amount of Each Receipt this Period
 50.00

C. Alan Richardson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2101 Village Road
 City Dearborn State MI Zip Code 48124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ford Motor Company Occupation Automotive Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229223
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 1362 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Alan Richardson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2101 Village Road
 City Dearborn State MI Zip Code 48124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ford Motor Company Occupation Automotive Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241240
 Amount of Each Receipt this Period
 50.00

B. M. Carol Richardson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5850 Ruhl Rd
 City Fairview State PA Zip Code 16415
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229225
 Amount of Each Receipt this Period
 25.00

C. M. Carol Richardson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5850 Ruhl Rd
 City Fairview State PA Zip Code 16415
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242299
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
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 1363 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Florence Reif Richman		Date of Receipt 12 / 15 / 2014 Transaction ID : 4236835
Mailing Address 40 Wesrt 77th Street		Amount of Each Receipt this Period 250.00
City New York	State NY	Zip Code 10024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) B. Susan & John Richmond		Date of Receipt 12 / 10 / 2014 Transaction ID : 4234607
Mailing Address 2530 Harry Wurzbach Rd Apt 1308		Amount of Each Receipt this Period 25.00
City San Antonio	State TX	Zip Code 78209
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Csaa	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. Julia Richter		Date of Receipt 12 / 03 / 2014 Transaction ID : 4231859
Mailing Address 8022 Taunton Road		Amount of Each Receipt this Period 25.00
City Indianapolis	State IN	Zip Code 46260
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer N/A	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 1364 OF 2648
	<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)
EMILY's List

A. Erica Richter
Full Name (Last, First, Middle Initial)
Mailing Address 6 Dover Court

City San Carlos	State CA	Zip Code 94070
--------------------	-------------	-------------------

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 ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	10	/	2014

Transaction ID : 4234471

Amount of Each Receipt this Period

25.00

B. Louiseann Richter
Full Name (Last, First, Middle Initial)
Mailing Address 235 Calloway Drive

City Evans	State GA	Zip Code 30809
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer University Of Phoenix	Occupation Professor
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4230132

Amount of Each Receipt this Period

20.00

C. Louiseann Richter
Full Name (Last, First, Middle Initial)
Mailing Address 235 Calloway Drive

City Evans	State GA	Zip Code 30809
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer University Of Phoenix	Occupation Professor
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240777

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 1365 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Katharine Ricklefs
 Full Name (Last, First, Middle Initial)
 Mailing Address 3731 St Francis Dr
 City Lafayette State CA Zip Code 94549
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231393
 Amount of Each Receipt this Period
 15.00

B. Ms. Sarah Byrn Rickman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1604 Lewis Ridge View
 City Colorado Springs State CO Zip Code 80907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Author/Editor Occupation Nonse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233657
 Amount of Each Receipt this Period
 20.00

C. Mrs. Marcia Rider
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Acacia Way
 City Santa Cruz State CA Zip Code 95062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Capitola Book Cafe Occupation Book Seller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227453
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 1366 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Alyson P. Rieke
 Full Name (Last, First, Middle Initial)
 Mailing Address 1630 43rd Ave. E., Apt. 1200
 City Seattle State WA Zip Code 98112
 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 ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4231180
 Amount of Each Receipt this Period
 225.00

B. Diana Rigg
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Applewood Ln
 City Camden State ME Zip Code 04843
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231182
 Amount of Each Receipt this Period
 25.00

C. Harriet Riley
 Full Name (Last, First, Middle Initial)
 Mailing Address 12535 Boheme Drive
 City Houston State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234971
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 1367 OF 2648
	(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)
EMILY's List

A. Ms. Ellin S. Rind
Full Name (Last, First, Middle Initial)
Mailing Address 123 Oxford Road

City New Rochelle	State NY	Zip Code 10804
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Devry University	Occupation Adjunct Prof
--------------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4240090

Amount of Each Receipt this Period
50.00

B. Pauline Rippel
Full Name (Last, First, Middle Initial)
Mailing Address 8645 Butte Street

City La Mesa	State CA	Zip Code 91941
-----------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4230170

Amount of Each Receipt this Period
50.00

C. Pauline Rippel
Full Name (Last, First, Middle Initial)
Mailing Address 8645 Butte Street

City La Mesa	State CA	Zip Code 91941
-----------------	-------------	-------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240835

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1368 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert R. Ritchey		Date of Receipt 12 / 05 / 2014 Transaction ID : 4232871
Mailing Address 15443 S 44th Way		Amount of Each Receipt this Period 20.00
City Phoenix	State AZ	Zip Code 85044
FEC ID number of contributing federal political committee. C		
Name of Employer Quest Engineering & Development, Inc	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.49	

Full Name (Last, First, Middle Initial) B. Ms. Virginia H. Ritchie		Date of Receipt 12 / 12 / 2014 Transaction ID : 4235792
Mailing Address 1848 Westview Rd		Amount of Each Receipt this Period 35.00
City Charlottesville	State VA	Zip Code 22903
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	

Full Name (Last, First, Middle Initial) C. Ms. Virginia H. Ritchie		Date of Receipt 12 / 12 / 2014 Transaction ID : 4235793
Mailing Address 1848 Westview Rd		Amount of Each Receipt this Period 50.00
City Charlottesville	State VA	Zip Code 22903
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 1369 OF 2648
	<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)
EMILY's List

A. Ms. Cynthia J. Ritchie
Full Name (Last, First, Middle Initial)

Mailing Address 14320 Channel Dr.

City La Conner	State WA	Zip Code 98257
-------------------	-------------	-------------------

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 ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2014

Transaction ID : 4236333

Amount of Each Receipt this Period

15.00

B. David Ritchie
Full Name (Last, First, Middle Initial)

Mailing Address 68 Willow Oak Ave

City Ocean View	State DE	Zip Code 19970
--------------------	-------------	-------------------

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 ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : 4243248

Amount of Each Receipt this Period

15.00

C. Ms. Susan Ritchie-Ahrens
Full Name (Last, First, Middle Initial)

Mailing Address 128 Oakwood Dr.

City Wading River	State NY	Zip Code 11792
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Suffolk Co Dept Health	Occupation Registered Nurse
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : 4243513

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 1370 OF 2648
	<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)
EMILY's List

A. Barbara Ritchin
Full Name (Last, First, Middle Initial)

Mailing Address 401 East 74th Street
Apt. 16-D

City New York State NY Zip Code 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
12 / 18 / 2014
Transaction ID : 4238099

Amount of Each Receipt this Period
50.00

B. Mrs. Shirley A. Ritter
Full Name (Last, First, Middle Initial)

Mailing Address 7100 Holmes Park Rd.Apt. 122

City Lincoln State NE Zip Code 68506

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232892

Amount of Each Receipt this Period
20.00

C. Ms. Beverly L. Ritter
Full Name (Last, First, Middle Initial)

Mailing Address 202 Mason Rd.

City Melrose State FL Zip Code 32666

FEC ID number of contributing federal political committee. **C**

Name of Employer Stened Occupation Writer/Publisher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230742

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00

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 1371 OF 2648
	<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)
EMILY's List

A. Ms. Alyce R. Ritti
Full Name (Last, First, Middle Initial)

Mailing Address 170 Cherrywood Way

City Port Matilda State PA Zip Code 16870

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 ▼
218.00

Date of Receipt
12 / 30 / 2014
Transaction ID : 4243146

Amount of Each Receipt this Period
57.00

B. Ms. Kimberly K. Ritzheimer
Full Name (Last, First, Middle Initial)

Mailing Address 20578 East Buchanan Drive

City Aurora State CO Zip Code 80011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dept. of Defense Information Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 / 17 / 2014
Transaction ID : 4237740

Amount of Each Receipt this Period
25.00

C. Jan Rivers
Full Name (Last, First, Middle Initial)

Mailing Address 13317 Southridge Rd

City Minnetonka State MN Zip Code 55305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dorsey Whitney Librarian

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232327

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 132.00

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 1372 OF 2648
	<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)
EMILY's List

A. Ms. Barbara Ro
Full Name (Last, First, Middle Initial)
Mailing Address 1755 E. 55th Street, Apt.701

City Chicago	State IL	Zip Code 60615
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 ▼ 350.00	

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233241

Amount of Each Receipt this Period
100.00

B. Mr. Thomas A. Roach
Full Name (Last, First, Middle Initial)
Mailing Address 5965 S Us Hwy1

City Grant	State FL	Zip Code 32949
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Date of Receipt
12 / 11 / 2014
Transaction ID : 4234958

Amount of Each Receipt this Period
15.00

C. Mr. Frank Robben
Full Name (Last, First, Middle Initial)
Mailing Address 902D-1 Prospect St

City Honolulu	State HI	Zip Code 96822
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Scientist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
12 / 17 / 2014
Transaction ID : 4237797

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	215.00
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 1373 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Joel Robbin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229230
Mailing Address 2240 Rowley Ave		Amount of Each Receipt this Period 10.00
City Madison	State WI	Zip Code 53726
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation Retired		Aggregate Year-to-Date ▼ 240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Joel Robbin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232048
Mailing Address 2240 Rowley Ave		Amount of Each Receipt this Period 10.00
City Madison	State WI	Zip Code 53726
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation Retired		Aggregate Year-to-Date ▼ 240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joel Robbin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233386
Mailing Address 2240 Rowley Ave		Amount of Each Receipt this Period 10.00
City Madison	State WI	Zip Code 53726
FEC ID number of contributing federal political committee. C	Name of Employer None	
Occupation Retired		Aggregate Year-to-Date ▼ 240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 1374 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Joel Robbin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241746
Mailing Address 2240 Rowley Ave		Amount of Each Receipt this Period 10.00
City Madison	State WI	Zip Code 53726
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Dr. Joan Warthling Roberts		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2014 Transaction ID : 4238337
Mailing Address 750 McKinley Parkway		Amount of Each Receipt this Period 86.00
City Buffalo	State NY	Zip Code 14220
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 ▼ 343.00	

Full Name (Last, First, Middle Initial) C. Eleda B. Roberts		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 27 / 2014 Transaction ID : 4228333
Mailing Address PO Box 831 89 Calle Martinez		Amount of Each Receipt this Period 25.00
City Arroyo Seco	State NM	Zip Code 87514
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 ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	121.00
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 1375 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Barbara Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 249 Brooker Hill Rd
 City Becket State MA Zip Code 01223
 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 ▼ 350.00

Date of Receipt
 11 / 25 / 2014
Transaction ID : 4230158
 Amount of Each Receipt this Period
 25.00

B. Eleda B. Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 831
 89 Calle Martinez
 City Arroyo Seco State NM Zip Code 87514
 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 ▼ 350.00

Date of Receipt
 12 / 26 / 2014
Transaction ID : 4240718
 Amount of Each Receipt this Period
 25.00

C. Barbara Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 249 Brooker Hill Rd
 City Becket State MA Zip Code 01223
 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 ▼ 350.00

Date of Receipt
 12 / 26 / 2014
Transaction ID : 4240800
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 1376 OF 2648
	<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)
EMILY's List

A. Ms. Jacquelyn Roberts
Full Name (Last, First, Middle Initial)

Mailing Address 232 Old Reddish School Road

City	State	Zip Code
Silex	MO	63377

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2014

Transaction ID : 4238871

Amount of Each Receipt this Period

1000.00
30.00

B. Mr. John Roberts
Full Name (Last, First, Middle Initial)

Mailing Address 430 S. Hill Avenue

City	State	Zip Code
Pasadena	CA	91106

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230743

Amount of Each Receipt this Period

1000.00

C. Dianna Roberts
Full Name (Last, First, Middle Initial)

Mailing Address 2601 S Braeswood Blvd, Apt 306

City	State	Zip Code
Houston	TX	77025

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Ut Md Anderson Cancer Center	Data Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4231725

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	1055.00
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 1377 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dianna Roberts		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2014
Mailing Address 2601 S Braeswood Blvd, Apt 306		Transaction ID : 4237128
City Houston	State TX	Zip Code 77025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Ut Md Anderson Cancer Center	Occupation Data Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Dr. Ruth Robertson		Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address PO Box 1296		Transaction ID : 4228101
City Jefferson City	State MO	Zip Code 65102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Lincoln University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

Full Name (Last, First, Middle Initial) C. Dr. Ruth Robertson		Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2014
Mailing Address PO Box 1296		Transaction ID : 4240601
City Jefferson City	State MO	Zip Code 65102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Lincoln University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 1378 OF 2648
	<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)
EMILY's List

A. Dr. Ruth Robertson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1296

City Jefferson City State MO Zip Code 65102

FEC ID number of contributing federal political committee. **C**

Name of Employer Lincoln University Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : 4243211

Amount of Each Receipt this Period
10.00

B. Ms. Sandra M. Robertson
Full Name (Last, First, Middle Initial)

Mailing Address 2211 SW Park Pl #902

City Portland State OR Zip Code 97205

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2014

Transaction ID : 4233397

Amount of Each Receipt this Period
20.00

C. Ms. Emily Robertson
Full Name (Last, First, Middle Initial)

Mailing Address 505 Jefferson Ave., 19th Floor

City Toledo State OH Zip Code 43604

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 ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2014

Transaction ID : 4232489

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **80.00**

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 1379 OF 2648
	<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)
EMILY's List

A. Ms. Diana Robin
Full Name (Last, First, Middle Initial)
Mailing Address 512 N. McClurg Ct. Apt. 907

City Chicago	State IL	Zip Code 60611
-----------------	-------------	-------------------

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 ▼
2225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	29	/	2014

Transaction ID : 4242441

Amount of Each Receipt this Period
250.00

B. Ms. Diana Robin
Full Name (Last, First, Middle Initial)
Mailing Address 512 N. McClurg Ct. Apt. 907

City Chicago	State IL	Zip Code 60611
-----------------	-------------	-------------------

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 ▼
2225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4230745

Amount of Each Receipt this Period
300.00

C. Dr. Carol B. Robin
Full Name (Last, First, Middle Initial)
Mailing Address 269 John Joy Rd

City Woodstock	State NY	Zip Code 12498
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Chiropractor
-----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	19	/	2014

Transaction ID : 4238872

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	575.00
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 1380 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Melissa Clive Robins
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 East Bayberry Court
 City Durham State NC Zip Code 27713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 328.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229232
 Amount of Each Receipt this Period
 15.00

B. Ms. Melissa Clive Robins
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 East Bayberry Court
 City Durham State NC Zip Code 27713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 328.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241549
 Amount of Each Receipt this Period
 15.00

C. Mr. Scott Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 625 Olima Street
 City Sausalito State CA Zip Code 94965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236933
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 1381 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Martha Robinson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014
Mailing Address 4234 247th St.		Transaction ID : 4230746
City Little Neck	State NY	Zip Code 11363
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Nyc Dohmh	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Mr. John G. Robinson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014
Mailing Address P.O. Box 6344		Transaction ID : 4243115
City Lincoln	State MA	Zip Code 01773
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Dr. Sally S. Robinson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014
Mailing Address 1211 Church St.		Transaction ID : 4235228
City Galveston	State TX	Zip Code 77550
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Utmb	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 1382 OF 2648
	<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)
EMILY's List

A. Ted Robinson
Full Name (Last, First, Middle Initial)

Mailing Address 1400 Schoolhouse Way

City San Marcos State CA Zip Code 92078

FEC ID number of contributing federal political committee. **C**

Name of Employer Va Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : 4230172

Amount of Each Receipt this Period
50.00

B. Ted Robinson
Full Name (Last, First, Middle Initial)

Mailing Address 1400 Schoolhouse Way

City San Marcos State CA Zip Code 92078

FEC ID number of contributing federal political committee. **C**

Name of Employer Va Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014

Transaction ID : 4240837

Amount of Each Receipt this Period
50.00

C. Ms. Virginia L. Robinson
Full Name (Last, First, Middle Initial)

Mailing Address 2727 31st Ave South

City Seattle State WA Zip Code 98144

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2014

Transaction ID : 4233223

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **175.00**

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 1383 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Leonie Roblin
Full Name (Last, First, Middle Initial)
Mailing Address 3911 Greenwood Avenue N
City Seattle State WA Zip Code 98103
FEC ID number of contributing federal political committee. **C**
Name of Employer Biocare Medical Llc Occupation Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4226702
Amount of Each Receipt this Period
100.00

B. Ms. Leonie Roblin
Full Name (Last, First, Middle Initial)
Mailing Address 3911 Greenwood Avenue N
City Seattle State WA Zip Code 98103
FEC ID number of contributing federal political committee. **C**
Name of Employer Biocare Medical Llc Occupation Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2014
Transaction ID : 4243421
Amount of Each Receipt this Period
125.00

C. Mary Ellen Rockdale
Full Name (Last, First, Middle Initial)
Mailing Address 21 El Camino Terrace
City Walnut Creek State CA Zip Code 94596
FEC ID number of contributing federal political committee. **C**
Name of Employer The Clorox Company Occupation Accountant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 17 / 2014
Transaction ID : 4237688
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	235.00
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 1384 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jenny S. K. Rockwell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229234
Mailing Address 5105 Atlanta Way		Amount of Each Receipt this Period 10.00
City Sacramento	State CA	Zip Code 95841
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) B. Jenny S. K. Rockwell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233352
Mailing Address 5105 Atlanta Way		Amount of Each Receipt this Period 10.00
City Sacramento	State CA	Zip Code 95841
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) C. Jenny S. K. Rockwell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241331
Mailing Address 5105 Atlanta Way		Amount of Each Receipt this Period 10.00
City Sacramento	State CA	Zip Code 95841
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 1385 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Elizabeth Rodgers

Mailing Address 8 Remsen St.

City Brooklyn	State NY	Zip Code 11201
------------------	-------------	-------------------

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 ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2014

Transaction ID : 4231187

Amount of Each Receipt this Period
115.00

Full Name (Last, First, Middle Initial)
B. Ms. Carol Roe

Mailing Address 943 Beverly Rd.

City Cleveland Heights	State OH	Zip Code 44121
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Centers For Dialysis Care	Occupation Rn/Attorney
---	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2014

Transaction ID : 4241056

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Natasha Roemer

Mailing Address 131 Riverside Dr. Apt. 4d

City New York	State NY	Zip Code 10024
------------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4230152

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	240.00
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 1386 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Natasha Roemer
 Full Name (Last, First, Middle Initial)
 Mailing Address 131 Riverside Dr. Apt. 4d
 City New York State NY Zip Code 10024
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240797
 Amount of Each Receipt this Period
 25.00

B. Fred Roesel
 Full Name (Last, First, Middle Initial)
 Mailing Address 3806 Piney Grove Dr.
 City Tallahassee State FL Zip Code 32311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Marquis Software Occupation Business Architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233697
 Amount of Each Receipt this Period
 25.00

c. Ms. Stephanie Rogall
 Full Name (Last, First, Middle Initial)
 Mailing Address 16107 W Huron Dr
 City Sun City West State AZ Zip Code 85375
 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 ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238874
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 1387 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Stephanie Rogall		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014
Mailing Address 16107 W Huron Dr		Transaction ID : 4236335
City Sun City West	State AZ	Zip Code 85375
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00	
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 ▼ 285.00	

Full Name (Last, First, Middle Initial) B. Edie Rogat		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014
Mailing Address 1217 Tamranae Ct		Transaction ID : 4244737
City Austin	State TX	Zip Code 78746
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1120.00	

Full Name (Last, First, Middle Initial) C. Ms. Donna Rogers		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 3602 Willow Lake Ln		Transaction ID : 4229238
City Enid	State OK	Zip Code 73703
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 1388 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Donna Rogers
 Full Name (Last, First, Middle Initial)
 Mailing Address 3602 Willow Lake Ln
 City Enid State OK Zip Code 73703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241550
 Amount of Each Receipt this Period
 35.00

B. Mrs. Ferne Rogers
 Full Name (Last, First, Middle Initial)
 Mailing Address 2500 Woodlawn Dr
 City Charleston State IL Zip Code 61920
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227696
 Amount of Each Receipt this Period
 100.00

C. Ms. Wanda Jo Rogers
 Full Name (Last, First, Middle Initial)
 Mailing Address 12325 Shorehan Ct
 City Oklahoma City State OK Zip Code 73170
 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 ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230750
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
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 1389 OF 2648
	<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)
EMILY's List

A. Ms. Wanda Jo Rogers
Full Name (Last, First, Middle Initial)
Mailing Address 12325 Shorehan Ct
City Oklahoma City State OK Zip Code 73170
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 **315.00**

Date of Receipt **12 / 17 / 2014**
Transaction ID : 4237536
Amount of Each Receipt this Period **35.00**

B. Shirley Rogers
Full Name (Last, First, Middle Initial)
Mailing Address 1221 SW 10th #702
City Portland State OR Zip Code 97205
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 **550.00**

Date of Receipt **12 / 10 / 2014**
Transaction ID : 4234597
Amount of Each Receipt this Period **50.00**

C. Ms. Abby Rogers
Full Name (Last, First, Middle Initial)
Mailing Address 1 Stonepath Court
City Rockville State MD Zip Code 20854
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt **11 / 28 / 2014**
Transaction ID : 4229237
Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **110.00**
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 1390 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Abby Rogers		Date of Receipt
Mailing Address 1 Stonepath Court		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Rockville	MD	20854
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4242306
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="250.00"/>
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. Ms. Lynn B. Rognstad		Date of Receipt
Mailing Address 415 Canby St		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Vermillion	SD	57069
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4227563
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="50.00"/>
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. Dr. Rae W Rohfeld		Date of Receipt
Mailing Address 532 Winkworth Parkway		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
Syracuse	NY	13215
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4235456
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="330.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="95.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1391 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Rae W Rohfeld		Date of Receipt
Mailing Address 532 Winkworth Parkway		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Syracuse	State NY	Zip Code 13215
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4241551
Name of Employer None		Amount of Each Receipt this Period
Occupation None		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="330.00"/>		

Full Name (Last, First, Middle Initial) B. Ms. Mary K. Laub Rohwer		Date of Receipt
Mailing Address 15640 Edmond Rd NW		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Calumet	State OK	Zip Code 73014
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4228103
Name of Employer None		Amount of Each Receipt this Period
Occupation None		<input type="text" value="35.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="350.00"/>		

Full Name (Last, First, Middle Initial) C. Mr. James L. Rolleston		Date of Receipt
Mailing Address 32 Green Mill Lane		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City Durham	State NC	Zip Code 27707
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4231853
Name of Employer Duke University		Amount of Each Receipt this Period
Occupation Duke University		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="300.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="110.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1392 OF 2648
	<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)
EMILY's List

A. Ms. Donna Roloff
Full Name (Last, First, Middle Initial)
Mailing Address 2705 E 62nd Lane

City Spokane	State WA	Zip Code 99223
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2014
Transaction ID : 4232415

Amount of Each Receipt this Period
20.00

B. Ms. Donna Roloff
Full Name (Last, First, Middle Initial)
Mailing Address 2705 E 62nd Lane

City Spokane	State WA	Zip Code 99223
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FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4227589

Amount of Each Receipt this Period
35.00

C. Ms. Barbara Josephine Rolph
Full Name (Last, First, Middle Initial)
Mailing Address 256 Sycamore Avenue

City Mill Valley	State CA	Zip Code 94941
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested None	Occupation Requested None
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014
Transaction ID : 4237719

Amount of Each Receipt this Period
18.00

SUBTOTAL of Receipts This Page (optional).....▶	73.00
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 1393 OF 2648
	<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)
EMILY's List

A. Ms. Barbara Josephine Rolph
Full Name (Last, First, Middle Initial)

Mailing Address 256 Sycamore Avenue

City Mill Valley State CA Zip Code 94941

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014

Transaction ID : 4239477

Amount of Each Receipt this Period
 18.00

B. Linda Roma
Full Name (Last, First, Middle Initial)

Mailing Address 41 Center Street

City Rumson State NJ Zip Code 07760

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

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
 12 / 19 / 2014

Transaction ID : 4238879

Amount of Each Receipt this Period
 25.00

C. Ms. Charlene Romanosky
Full Name (Last, First, Middle Initial)

Mailing Address 1499 N. Buys Rd.

City Muskegon State MI Zip Code 49445

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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4229239

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	68.00
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 1394 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Charlene Romanosky			Date of Receipt
Mailing Address 1499 N. Buys Rd.			M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
City	State	Zip Code	Transaction ID : 4242307
Muskegon	MI	49445	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer	Occupation		
None	Retired		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	300.00		

Full Name (Last, First, Middle Initial) B. Ms. Marjorie Romans			Date of Receipt
Mailing Address 5124 Encino Ave			M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014
City	State	Zip Code	Transaction ID : 4233458
Encino	CA	91316	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer	Occupation		
None	Retired		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2250.00		

Full Name (Last, First, Middle Initial) C. Catherine Romley			Date of Receipt
Mailing Address 5631 Vista Del Rio Ct.			M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014
City	State	Zip Code	Transaction ID : 4236700
Bakersfield	CA	93308	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer	Occupation		
None	None		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	460.00		

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 1395 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Patricia Prince Rose		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4240100
Mailing Address 17031 Encino Hills Drive		Amount of Each Receipt this Period 75.00
City Encino	State CA	Zip Code 91436
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 1925.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Patricia Prince Rose		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4229778
Mailing Address 17031 Encino Hills Drive		Amount of Each Receipt this Period 100.00
City Encino	State CA	Zip Code 91436
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 1925.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Patricia Prince Rose		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2014 Transaction ID : 4235492
Mailing Address 17031 Encino Hills Drive		Amount of Each Receipt this Period 100.00
City Encino	State CA	Zip Code 91436
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 1925.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	275.00
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 1396 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Patricia Prince Rose		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240857
Mailing Address 17031 Encino Hills Drive		Amount of Each Receipt this Period 100.00
City Encino	State CA	Zip Code 91436
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1925.00	

Full Name (Last, First, Middle Initial) B. Ms. Kathy T. Rose		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4234647
Mailing Address 130 8th Avenue, #5G		Amount of Each Receipt this Period 1200.00
City Brooklyn	State NY	Zip Code 11215
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 ▼ 2200.00	

Full Name (Last, First, Middle Initial) C. Ms. Nancy P. Rose		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234555
Mailing Address 585 Sobrato Dr.		Amount of Each Receipt this Period 30.00
City Campbell	State CA	Zip Code 95008
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00	

SUBTOTAL of Receipts This Page (optional).....▶	1330.00
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 1397 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ruth W. Rosen		Date of Receipt
Mailing Address 5 Mt. Hood Ct.		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
San Rafael	CA	94903
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4240101
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3390.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Ruth W. Rosen		Date of Receipt
Mailing Address 5 Mt. Hood Ct.		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
San Rafael	CA	94903
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4234231
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3390.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Ruth W. Rosen		Date of Receipt
Mailing Address 5 Mt. Hood Ct.		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
San Rafael	CA	94903
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4244886
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="85.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3390.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="145.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1398 OF 2648
	<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)
EMILY's List

A. Ms. Ruth W. Rosen
Full Name (Last, First, Middle Initial)
Mailing Address 5 Mt. Hood Ct.
City San Rafael State CA Zip Code 94903
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3390.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4229241
Amount of Each Receipt this Period
100.00

B. Ms. Ruth W. Rosen
Full Name (Last, First, Middle Initial)
Mailing Address 5 Mt. Hood Ct.
City San Rafael State CA Zip Code 94903
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3390.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4242309
Amount of Each Receipt this Period
100.00

C. Ms. Deanne Rosenberg
Full Name (Last, First, Middle Initial)
Mailing Address 19 Bass Cove Ln
City Wareham State MA Zip Code 02571
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 ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4229242
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
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 1399 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Karen Rosenberg			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4226713
Mailing Address 910 Pickett Ln.			Amount of Each Receipt this Period 100.00
City Newark	State DE	Zip Code 19711	
FEC ID number of contributing federal political committee. C			
Name of Employer University of Delaware	Occupation professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) B. Ms. Joan Rosenblatt			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227769
Mailing Address 701 King Farm Blvd., Apt. 630			Amount of Each Receipt this Period 100.00
City Rockville	State MD	Zip Code 20850	
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 ▼ 650.00		

Full Name (Last, First, Middle Initial) C. Ms. Blanche Rosenblatt			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 04 / 2014 Transaction ID : 4232211
Mailing Address 104 S. Baltimore Avenue			Amount of Each Receipt this Period 200.00
City Ventnor City	State NJ	Zip Code 08406	
FEC ID number of contributing federal political committee. C			
Name of Employer REQUESTED	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 1400 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Linda Rosensweig		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014 Transaction ID : 4235322	
Mailing Address 116 Carthage Rd.		Amount of Each Receipt this Period 250.00	
City Scarsdale	State NY	Zip Code 10583	
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation tennis pro		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Mr. Norman L. Rosenthal		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233063	
Mailing Address 9333 Memorial Drive #402		Amount of Each Receipt this Period 200.00	
City Houston	State TX	Zip Code 77024	
FEC ID number of contributing federal political committee. C			
Name of Employer City Financial Services	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) C. Mrs. Patricia M. Rosenthal		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236408	
Mailing Address #511 100 Newbury Court		Amount of Each Receipt this Period 50.00	
City Concord	State MA	Zip Code 01742	
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 ▼ 1110.00		

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1401 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Gina I. Rosnow
Full Name (Last, First, Middle Initial)
Mailing Address 709 Lisboa Ct.
City Walnut Creek State CA Zip Code 94598
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 ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4229708
Amount of Each Receipt this Period
35.00

B. Mrs. Gina I. Rosnow
Full Name (Last, First, Middle Initial)
Mailing Address 709 Lisboa Ct.
City Walnut Creek State CA Zip Code 94598
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 ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240804
Amount of Each Receipt this Period
35.00

C. Leola Ross
Full Name (Last, First, Middle Initial)
Mailing Address 22402 Piper Terrace Ln
City Katy State TX Zip Code 77450
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 ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 03 / 2014
Transaction ID : 4231907
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 1402 OF 2648
(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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Sharon Ross

Mailing Address 404 Granite Way

City Johnstown State CO Zip Code 80534

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236183

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
B. Sharon Ross

Mailing Address 404 Granite Way

City Johnstown State CO Zip Code 80534

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241005

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Sharon Ross

Mailing Address 404 Granite Way

City Johnstown State CO Zip Code 80534

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229246

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00

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 1403 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Sharon Ross
 Full Name (Last, First, Middle Initial)
 Mailing Address 404 Granite Way
 City Johnstown State CO Zip Code 80534
 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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241747
 Amount of Each Receipt this Period
 25.00

B. Patricia Ross
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 Franklin St
 City Houghton State MI Zip Code 49931
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235472
 Amount of Each Receipt this Period
 25.00

C. Ms. Nancy Ross
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Newman St.
 City Keene State NH Zip Code 03431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228105
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 1404 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Ms. Nancy Ross
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Newman St.
 City Keene State NH Zip Code 03431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237149
 Amount of Each Receipt this Period
 15.00

B. Ms. Vivian Ross
 Full Name (Last, First, Middle Initial)
 Mailing Address 3703 N. Colton Ranch Rd.
 City Flagstaff State AZ Zip Code 86001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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
 12 / 08 / 2014
Transaction ID : 4233086
 Amount of Each Receipt this Period
 100.00

C. Mr. Richard Ross
 Full Name (Last, First, Middle Initial)
 Mailing Address 14706 Oracle Pl.
 City Pacific Plsds State CA Zip Code 90272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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
 12 / 19 / 2014
Transaction ID : 4238237
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	365.00
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 1405 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Geri Rossen		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2014 Transaction ID : 4235829
Mailing Address 1185 Spruce Street		Amount of Each Receipt this Period 50.00
City Berkeley	State CA	Zip Code 94707
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 283.33	

Full Name (Last, First, Middle Initial) B. Ms. Edna Caila Rossenas		Date of Receipt M M / D D / Y Y Y Y 11 / 30 / 2014 Transaction ID : 4229657
Mailing Address 1795 Shoreline Highway		Amount of Each Receipt this Period 15.00
City Muir Beach	State CA	Zip Code 94965
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1492.00	

Full Name (Last, First, Middle Initial) C. Ms. Edna Caila Rossenas		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236831
Mailing Address 1795 Shoreline Highway		Amount of Each Receipt this Period 35.00
City Muir Beach	State CA	Zip Code 94965
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1492.00	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 1406 OF 2648
(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)
EMILY's List

A. Ms. Edna Caila Rossenas
 Full Name (Last, First, Middle Initial)
 Mailing Address 1795 Shoreline Highway
 City State Zip Code
 Muir Beach CA 94965
 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 ▼
 1492.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240908
 Amount of Each Receipt this Period
 35.00

B. Dr. Amy Y. Rossman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1808 NW Sunview Dr
 City State Zip Code
 Corvallis OR 97330
 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 ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235493
 Amount of Each Receipt this Period
 100.00

C. Dr. Amy Y. Rossman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1808 NW Sunview Dr
 City State Zip Code
 Corvallis OR 97330
 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 ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236735
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
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 1407 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Nancy Rotering

Mailing Address 46 Lakeview Terrace

City Highland Park State IL Zip Code 60035

FEC ID number of contributing federal political committee. **C**

Name of Employer City Of Highland Park, Il Occupation Mayor

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
12 / 27 / 2014

Transaction ID : 4240977

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ms. Linda Roth

Mailing Address 150 Southgate Rd

City Sacramento State CA Zip Code 95815

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014

Transaction ID : 4228106

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Ms. Linda Roth

Mailing Address 150 Southgate Rd

City Sacramento State CA Zip Code 95815

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014

Transaction ID : 4228107

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **280.00**

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 1408 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Rochelle Rothbaum		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2014 Transaction ID : 4235974
Mailing Address 294 Richard Ct		Amount of Each Receipt this Period 10.00
City Pomona	State NY	Zip Code 10970
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 ▼ 1574.00	

Full Name (Last, First, Middle Initial) B. Rochelle Rothbaum		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2014 Transaction ID : 4239268
Mailing Address 294 Richard Ct		Amount of Each Receipt this Period 10.00
City Pomona	State NY	Zip Code 10970
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 ▼ 1574.00	

Full Name (Last, First, Middle Initial) C. Rochelle Rothbaum		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232053
Mailing Address 294 Richard Ct		Amount of Each Receipt this Period 25.00
City Pomona	State NY	Zip Code 10970
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 ▼ 1574.00	

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 1409 OF 2648
	<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

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)
EMILY's List

A. Rochelle Rothbaum
Full Name (Last, First, Middle Initial)
Mailing Address 294 Richard Ct
City Pomona State NY Zip Code 10970
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 ▼ 1574.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4232054
Amount of Each Receipt this Period 50.00

B. Mr. Michael Rothrock
Full Name (Last, First, Middle Initial)
Mailing Address 1745 Vallejo St.
City San Francisco State CA Zip Code 94123
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt 12 / 17 / 2014
Transaction ID : 4244862
Amount of Each Receipt this Period 20.00

C. Amalie R. Rothschild
Full Name (Last, First, Middle Initial)
Mailing Address 135 Hudson Street #1f
City New York State NY Zip Code 10013
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Photographer/Filmmaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 435.00

Date of Receipt 12 / 12 / 2014
Transaction ID : 4235857
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 1410 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Toby Rotman

Mailing Address 4107 Remington Park Ct

City Flower Mound State TX Zip Code 75028

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Piano Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : 4243545

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Mr. Ray Roulette

Mailing Address 20529 Vaccaro Ave

City Torrance State CA Zip Code 90503

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014

Transaction ID : 4227699

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Mr. Ray Roulette

Mailing Address 20529 Vaccaro Ave

City Torrance State CA Zip Code 90503

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014

Transaction ID : 4237542

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **225.00**

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 1411 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Deborah Rourke
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Adams Street
 City Lexington State MA Zip Code 02420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Fundraiser
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt
 11 / 25 / 2014
Transaction ID : 4230162
 Amount of Each Receipt this Period
 35.00

B. Deborah Rourke
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Adams Street
 City Lexington State MA Zip Code 02420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Fundraiser
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt
 12 / 26 / 2014
Transaction ID : 4240814
 Amount of Each Receipt this Period
 35.00

C. Mrs. Judith S Rowe
 Full Name (Last, First, Middle Initial)
 Mailing Address 4701 Willard Avenue, Apt 405
 City Chevy Chase State MD Zip Code 20815
 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 **915.00**

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4231856
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... **105.00**
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 1412 OF 2648
	(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)
EMILY's List

A. Mrs. Judith S Rowe
Full Name (Last, First, Middle Initial)
Mailing Address 4701 Willard Avenue, Apt 405

City Chevy Chase	State MD	Zip Code 20815
---------------------	-------------	-------------------

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 ▼
915.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	16	/	2014

Transaction ID : 4237249

Amount of Each Receipt this Period
50.00

B. Adrian J. Rowe
Full Name (Last, First, Middle Initial)
Mailing Address 380 Nicholson PI NW

City Bainbridge Island	State WA	Zip Code 98110
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	06	/	2014

Transaction ID : 4232406

Amount of Each Receipt this Period
20.00

C. Ms. Marcia Rowe
Full Name (Last, First, Middle Initial)
Mailing Address 5744 SW 8 PI

City Gainesville	State FL	Zip Code 32607
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Vamc	Occupation Medical Support Assistant
--------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
597.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	26	/	2014

Transaction ID : 4227777

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 1413 OF 2648
(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Evelyn Rowland		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4229818
Mailing Address 325 El Camino		Amount of Each Receipt this Period 25.00
City Sedona	State AZ	
Zip Code 86336		Amount of Each Receipt this Period 310.00
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Retired	Amount of Each Receipt this Period 310.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. Ms. Evelyn Rowland		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240767
Mailing Address 325 El Camino		Amount of Each Receipt this Period 25.00
City Sedona	State AZ	
Zip Code 86336		Amount of Each Receipt this Period 310.00
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Retired	Amount of Each Receipt this Period 310.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C. Lorene Rowland		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2014 Transaction ID : 4232541
Mailing Address 1550 Sutter St Apt 518		Amount of Each Receipt this Period 10.00
City San Francisco	State CA	
Zip Code 94109		Amount of Each Receipt this Period 575.00
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Retired	Amount of Each Receipt this Period 575.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 1414 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Philip Roy
 Full Name (Last, First, Middle Initial)
 Mailing Address 324 Fitzwater St
 City Philadelphia State PA Zip Code 19147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LEROY ASSOCIATES, INC. Occupation THEATER PRODUCER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **11 / 25 / 2014**
Transaction ID : 4226712
 Amount of Each Receipt this Period **300.00**

B. Robert Roy
 Full Name (Last, First, Middle Initial)
 Mailing Address 3075 Falcon Trail
 City Cookeville State TN Zip Code 38506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **595.00**

Date of Receipt **12 / 03 / 2014**
Transaction ID : 4232051
 Amount of Each Receipt this Period **10.00**

C. Robert Roy
 Full Name (Last, First, Middle Initial)
 Mailing Address 3075 Falcon Trail
 City Cookeville State TN Zip Code 38506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **595.00**

Date of Receipt **12 / 03 / 2014**
Transaction ID : 4232052
 Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional).....	330.00
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 1415 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Robert Roy

Mailing Address 3075 Falcon Trail

City State Zip Code
Cookeville TN 38506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238887

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Robert Roy

Mailing Address 3075 Falcon Trail

City State Zip Code
Cookeville TN 38506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228371

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Robert Roy

Mailing Address 3075 Falcon Trail

City State Zip Code
Cookeville TN 38506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241026

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 1416 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Robert Roy		Date of Receipt
Mailing Address 3075 Falcon Trail		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cookeville	TN	38506
FEC ID number of contributing federal political committee.		Transaction ID : 4234583
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="35.00"/>
Name of Employer	Occupation	
None	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="595.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. R. Christine Royer		Date of Receipt
Mailing Address 417 Riverside Dr #7a1		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
New York	NY	10025
FEC ID number of contributing federal political committee.		Transaction ID : 4232194
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="425.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Colleen Rozillis		Date of Receipt
Mailing Address 7033 19th Ave NW		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Seattle	WA	98117
FEC ID number of contributing federal political committee.		Transaction ID : 4229249
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Moss Adams Llp	Consultant	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="135.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1417 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Colleen Rozillis
 Full Name (Last, First, Middle Initial)
 Mailing Address 7033 19th Ave NW
 City State Zip Code
 Seattle WA 98117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Moss Adams Llp Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241271
 Amount of Each Receipt this Period
 25.00

B. Dr. Sharon Rubin
 Full Name (Last, First, Middle Initial)
 Mailing Address 83 Ridge Road
 City State Zip Code
 Ridgewood NJ 07450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239283
 Amount of Each Receipt this Period
 35.00

C. Brady Rubin
 Full Name (Last, First, Middle Initial)
 Mailing Address 619 N Mountain Ave
 City State Zip Code
 Ashland OR 97520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Actor/Writer
 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
 12 / 16 / 2014
Transaction ID : 4237167
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 1418 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Brady Rubin
 Full Name (Last, First, Middle Initial)
 Mailing Address 619 N Mountain Ave
 City Ashland State OR Zip Code 97520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Actor/Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237168
 Amount of Each Receipt this Period
 50.00

B. Ms. Cynthia Ruby
 Full Name (Last, First, Middle Initial)
 Mailing Address 14205 Squirrel Hollow Lane Suite 1001
 City Saratoga State CA Zip Code 95070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234911
 Amount of Each Receipt this Period
 50.00

C. Ms. Linda K. Rude
 Full Name (Last, First, Middle Initial)
 Mailing Address 839 Union St.
 City San Francisco State CA Zip Code 94133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Landscape Designer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 940.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238888
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 1419 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Gayle Ruedi
Full Name (Last, First, Middle Initial)

Mailing Address 527 Carolina Meadows Villa

City Chapel Hill	State NC	Zip Code 27517
---------------------	-------------	-------------------

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 ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236336

Amount of Each Receipt this Period
250.00

B. Barbara Rugeley
Full Name (Last, First, Middle Initial)

Mailing Address 1436 Mural Dr.

City Claremont	State CA	Zip Code 91711
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239087

Amount of Each Receipt this Period
100.00

c. Ms. Deb Ruggiero
Full Name (Last, First, Middle Initial)

Mailing Address 78 Columbia Ave.

City Jamestown	State RI	Zip Code 02835
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Dr.Communications Group	Occupation PRESIDENT ADV.MKTG.
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242472

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 1420 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Nancy Cirillo Ruggiero		Date of Receipt 12 / 03 / 2014 Transaction ID : 4231978
Mailing Address 33 Pond Ave		Amount of Each Receipt this Period 30.00
City Brookline	State MA	Zip Code 02445
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 360.00
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 ▼	

Full Name (Last, First, Middle Initial) B. Ms. Mary B. Ruhl		Date of Receipt 12 / 05 / 2014 Transaction ID : 4232309
Mailing Address 506 South Bronson Ave		Amount of Each Receipt this Period 1500.00
City Los Angeles	State CA	Zip Code 90020
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3000.00
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 ▼	

Full Name (Last, First, Middle Initial) C. Linda Rullman		Date of Receipt 12 / 19 / 2014 Transaction ID : 4238891
Mailing Address 733 Front St. #601 #601		Amount of Each Receipt this Period 50.00
City San Francisco	State CA	Zip Code 94111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 345.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	1580.00
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 1421 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Erkki Ruoslahti		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238892
Mailing Address PO Box 1597		Amount of Each Receipt this Period 100.00
City Rancho Santa Fe	State CA	Zip Code 92067
FEC ID number of contributing federal political committee. C		
Name of Employer Sanford-Burnham Medical Research Insti	Occupation Scientist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

Full Name (Last, First, Middle Initial) B. Joanne Rusch		Date of Receipt M M / D D / Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233340
Mailing Address 4171 Fallow St		Amount of Each Receipt this Period 50.00
City West Bloomfield	State MI	Zip Code 48323
FEC ID number of contributing federal political committee. C		
Name of Employer Blue Cross Blue Shield Mi	Occupation Director li	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Sandra Russ		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229251
Mailing Address 1717 Creekside Dr		Amount of Each Receipt this Period 50.00
City Stevensville	State MT	Zip Code 59870
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 1422 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Sandra Russ
 Full Name (Last, First, Middle Initial)
 Mailing Address 1717 Creekside Dr
 City State Zip Code
 Stevensville MT 59870
 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 ▼
 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4235107
 Amount of Each Receipt this Period
 50.00

B. Sandra Russ
 Full Name (Last, First, Middle Initial)
 Mailing Address 1717 Creekside Dr
 City State Zip Code
 Stevensville MT 59870
 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 ▼
 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241553
 Amount of Each Receipt this Period
 50.00

C. Ms. Barbara M. Russell
 Full Name (Last, First, Middle Initial)
 Mailing Address 134 Colburn Rd
 City State Zip Code
 New Boston NH 03070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234838
 Amount of Each Receipt this Period
 500.00

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: (check only one)	PAGE 1423 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Judith S. Russell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2426 Westside Drive
 City North Chili State NY Zip Code 14514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Farmer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **950.00**

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4244829
 Amount of Each Receipt this Period
50.00

B. Mr. John Rutledge
 Full Name (Last, First, Middle Initial)
 Mailing Address 56 Monument St. # 1
 City Medford State MA Zip Code 02155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Software Engineer Occupation Bullhorn, Inc
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4233712
 Amount of Each Receipt this Period
50.00

c. Itala T. Rutter
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 N. Zapata Hwy. #11
 City Laredo State TX Zip Code 78043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **367.00**

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236741
 Amount of Each Receipt this Period
16.00

SUBTOTAL of Receipts This Page (optional).....▶	116.00
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 1424 OF 2648
	<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

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)
EMILY's List

A. Donald Rutter
Full Name (Last, First, Middle Initial)

Mailing Address 4811 Creekside Dr

City New Bern State NC Zip Code 28562

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 ▼ **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : 4230757

Amount of Each Receipt this Period
50.00

B. Mr. Albert Ruzzo
Full Name (Last, First, Middle Initial)

Mailing Address 528 Providence St.

City West Warwick State RI Zip Code 02893

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 ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : 4230758

Amount of Each Receipt this Period
300.00

C. Ms. Rita Ryack
Full Name (Last, First, Middle Initial)

Mailing Address 6266 Rodgerton Drive

City Los Angeles State CA Zip Code 90068

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Famous Costume Designer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014

Transaction ID : 4235040

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional).....▶	385.00
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 1425 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Lis Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 96066 Oyster Bay Dr
 City State Zip Code
 Fernandina FL 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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 / 28 / 2014
Transaction ID : 4229254
 Amount of Each Receipt this Period
 25.00

B. Lis Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 96066 Oyster Bay Dr
 City State Zip Code
 Fernandina FL 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 28 / 2014
Transaction ID : 4242314
 Amount of Each Receipt this Period
 25.00

C. Mr. Kenneth Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1020 Kingston Road Apt 5k
 City State Zip Code
 Mount Shasta CA 96067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230124
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 1426 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Kenneth Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1020 Kingston Road Apt 5k
 City State Zip Code
 Mount Shasta CA 96067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240772
 Amount of Each Receipt this Period
 25.00

B. Ms. Joan L. Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Central Park West
 Apt. 11q
 City State Zip Code
 New York NY 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 585.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232516
 Amount of Each Receipt this Period
 20.00

C. Ruth Jean McManemin Ryden
 Full Name (Last, First, Middle Initial)
 Mailing Address 1019 Loblolly Pine
 City State Zip Code
 Arlington TX 76012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4232977
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 295.00
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 1427 OF 2648
	<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)
EMILY's List

A. Ms. Judith Rystar
Full Name (Last, First, Middle Initial)
Mailing Address 5 Edendale Ln.
City Durham State NH Zip Code 03824
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 31 / 2014
Transaction ID : 4243118
Amount of Each Receipt this Period 100.00

B. Mrs. Stephanie Sabar
Full Name (Last, First, Middle Initial)
Mailing Address 10593 Wilkins Ave.
City Los Angeles State CA Zip Code 90024
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4232067
Amount of Each Receipt this Period 25.00

C. Dr. Sandra Sabatini
Full Name (Last, First, Middle Initial)
Mailing Address 354 Vireo Road PO Box 62
City Buck Hill Falls State PA Zip Code 18323
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Clinical Psychologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 28 / 2014
Transaction ID : 4229255
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
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 1428 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Sandra Sabatini		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241258
Mailing Address 354 Vireo Road PO Box 62		Amount of Each Receipt this Period 250.00
City Buck Hill Falls	State PA	Zip Code 18323
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Clinical Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Joe Sabatino		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236714
Mailing Address 3371 Carambola Circle		Amount of Each Receipt this Period 25.00
City Coconut Creek	State FL	Zip Code 33066
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Ludmila Sabatiuk		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4234725
Mailing Address 7614 Mellor Avenue		Amount of Each Receipt this Period 100.00
City Sykesville	State MD	Zip Code 21784
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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1429 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Jeff R. Sachs
 Full Name (Last, First, Middle Initial)
 Mailing Address 26 Beacon Crest Dr.
 City Basking Ridge State NJ Zip Code 07920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Merck & Co., Inc. Occupation Scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243246
 Amount of Each Receipt this Period
 25.00

B. Joel W. Sachs
 Full Name (Last, First, Middle Initial)
 Mailing Address 83 Buckthorn Court
 City Paramus State NJ Zip Code 07652
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233036
 Amount of Each Receipt this Period
 100.00

C. Ms. Jeannie Sack
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Encanto Ave.
 City San Francisco State CA Zip Code 94115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 860.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238896
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 1430 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Brook Sadler
 Full Name (Last, First, Middle Initial)
 Mailing Address 7804 East 113th Avenue
 City Temple Terrace State FL Zip Code 33617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University South Florida Occupation Professor
 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
 12 / 11 / 2014
Transaction ID : 4234886
 Amount of Each Receipt this Period
 300.00

B. Marilyn Sadonis
 Full Name (Last, First, Middle Initial)
 Mailing Address 8401 Betty Ln
 City El Cerrito State CA Zip Code 94530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229257
 Amount of Each Receipt this Period
 20.00

C. Marilyn Sadonis
 Full Name (Last, First, Middle Initial)
 Mailing Address 8401 Betty Ln
 City El Cerrito State CA Zip Code 94530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242315
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	340.00
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 1431 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Steve Safford		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2014 Transaction ID : 4238249
Mailing Address 10036 II Route 64		Amount of Each Receipt this Period 200.00
City Sycamore	State IL	Zip Code 60178
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Farmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name (Last, First, Middle Initial) B. Mr. Sanford A. Safron		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2014 Transaction ID : 4231191
Mailing Address 3235 Robinhood Rd		Amount of Each Receipt this Period 75.00
City Tallahassee	State FL	Zip Code 32312
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	

Full Name (Last, First, Middle Initial) C. Robert Sagel		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234271
Mailing Address 2433 E. Newton St.		Amount of Each Receipt this Period 50.00
City Tulsa	State OK	Zip Code 74110
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 627.00	

SUBTOTAL of Receipts This Page (optional).....▶	325.00
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 1432 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Charlotte R. Sahnou
 Full Name (Last, First, Middle Initial)
 Mailing Address 2756 Chad Dr.
 City Eugene State OR Zip Code 97408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234451
 Amount of Each Receipt this Period
 50.00

B. Ms. Jacqueline Saintanne
 Full Name (Last, First, Middle Initial)
 Mailing Address 8424 Santa Monica Blvd #303
 City West Hollywood State CA Zip Code 90069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Costume Designer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229258
 Amount of Each Receipt this Period
 10.00

C. Ms. Jacqueline Saintanne
 Full Name (Last, First, Middle Initial)
 Mailing Address 8424 Santa Monica Blvd #303
 City West Hollywood State CA Zip Code 90069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Costume Designer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239188
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 1433 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jacqueline Saintanne
 Full Name (Last, First, Middle Initial)
 Mailing Address 8424 Santa Monica Blvd #303
 City West Hollywood State CA Zip Code 90069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Costume Designer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241277
 Amount of Each Receipt this Period
 10.00

B. Mr. Robert Sakakeeny
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 Birchwood Road
 City Worcester State MA Zip Code 01609
 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 ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232548
 Amount of Each Receipt this Period
 10.00

C. Mr. Ralph Pito Salas
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Intervale Road
 City Arlington State MA Zip Code 02474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Brandeis University Occupation 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
 12 / 02 / 2014
Transaction ID : 4231441
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	270.00
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 1434 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Nancy Saleeby		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233684
Mailing Address 1902 Park Ave.		Amount of Each Receipt this Period 20.00
City Los Angeles	State CA	Zip Code 90026
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Ms. Susan Salenger		Date of Receipt 12 / 15 / 2014 Transaction ID : 4244831
Mailing Address 330 Fair Ave		Amount of Each Receipt this Period 25.00
City Petaluma	State CA	Zip Code 94952
FEC ID number of contributing federal political committee. C	Name of Employer Self	Occupation Writer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Diane Salera		Date of Receipt 12 / 02 / 2014 Transaction ID : 4231194
Mailing Address 2405 Topgallant CT		Amount of Each Receipt this Period 75.00
City Fairfield	State CA	Zip Code 94534
FEC ID number of contributing federal political committee. C	Name of Employer REQUESTED	Occupation REQUESTED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 1435 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jeanne Barnett Saletan
 Full Name (Last, First, Middle Initial)
 Mailing Address 5014 Lymbar Drive
 City Houston State TX Zip Code 77096
 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 ▼ 400.00

Date of Receipt 12 / 30 / 2014
Transaction ID : 4242716
 Amount of Each Receipt this Period 200.00

B. Ms. Elizabeth Salett
 Full Name (Last, First, Middle Initial)
 Mailing Address 1308 29th Street NW
 City Washington State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nat'l Multicultural Inst. Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 17 / 2014
Transaction ID : 4237519
 Amount of Each Receipt this Period 500.00

C. Mr. David Saltonstall
 Full Name (Last, First, Middle Initial)
 Mailing Address 235 E. 22nd Street, Apt. 4K
 City New York State NY Zip Code 10010
 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 ▼ 475.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4227442
 Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00
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 1436 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Hedria Saltzman
 Full Name (Last, First, Middle Initial)
 Hedria Saltzman
 Mailing Address 11 Circle Wood Road
 City Rochester State NY Zip Code 14625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4238899
 Amount of Each Receipt this Period
 35.00

B. Ms. Nancy J. Saltzman
 Full Name (Last, First, Middle Initial)
 Ms. Nancy J. Saltzman
 Mailing Address 2910 Bonne Vista Drive
 City Colorado Springs State CO Zip Code 80906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Author
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 12 / 16 / 2014
Transaction ID : 4237146
 Amount of Each Receipt this Period
 50.00

C. Ms. Nancy J. Saltzman
 Full Name (Last, First, Middle Initial)
 Ms. Nancy J. Saltzman
 Mailing Address 2910 Bonne Vista Drive
 City Colorado Springs State CO Zip Code 80906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Author
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231397
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	185.00
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 1437 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Melinda C. Salzman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233290
Mailing Address 1707 Black Oak Ln		Amount of Each Receipt this Period 300.00
City Silver Spring	State MD	Zip Code 20910
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Social Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Michael Samachson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229260
Mailing Address 1945 Lynnwood Drive		Amount of Each Receipt this Period 15.00
City Charlotte	State NC	Zip Code 28209
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 ▼ 445.00	

Full Name (Last, First, Middle Initial) C. Michael Samachson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241750
Mailing Address 1945 Lynnwood Drive		Amount of Each Receipt this Period 15.00
City Charlotte	State NC	Zip Code 28209
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 ▼ 445.00	

SUBTOTAL of Receipts This Page (optional).....▶	330.00
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 1438 OF 2648
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Mary B. Sams		Date of Receipt
Mailing Address PO Box 85		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City Cornwall	State CT	Zip Code 06753
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4240108
Name of Employer Self		Amount of Each Receipt this Period
Occupation ANTIQUES DEALER		<input type="text" value="240.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Nancy Anne Samuels		Date of Receipt
Mailing Address 111 NW 180		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City Shoreline	State WA	Zip Code 98177
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4239284
Name of Employer Seattle Website Usability		Amount of Each Receipt this Period
Occupation Website Usability Researcher		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="230.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Melinda S. Samuelson		Date of Receipt
Mailing Address 1235 Bay St.		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Alameda	State CA	Zip Code 94501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4242692
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1030.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1439 OF 2648
	<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)
EMILY's List

A. Ms. Barbara Sander
Full Name (Last, First, Middle Initial)
Mailing Address 7762 US Open Loop
City Lakewood Ranch State FL Zip Code 34202
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
None Retired
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236457
Amount of Each Receipt this Period
150.00

B. Ms. Joanne M Sanders
Full Name (Last, First, Middle Initial)
Mailing Address 5144 Carrollton Ave
City Indianapolis State IN Zip Code 46205
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Int'l Alliance Of Theatrical Stage Emp Int'l Representative
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1500.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236734
Amount of Each Receipt this Period
100.00

C. Ms. Joanne M Sanders
Full Name (Last, First, Middle Initial)
Mailing Address 5144 Carrollton Ave
City Indianapolis State IN Zip Code 46205
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Int'l Alliance Of Theatrical Stage Emp Int'l Representative
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1500.00

Date of Receipt
12 / 16 / 2014
Transaction ID : 4244857
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
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 1440 OF 2648
	<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)
EMILY's List

A. Ms. Marilyn Sanders
Full Name (Last, First, Middle Initial)
Marilyn Sanders
Mailing Address PO Box 847
City Marfa State TX Zip Code 79843
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 **538.00**

Date of Receipt
12 / 12 / 2014
Transaction ID : 4235206
Amount of Each Receipt this Period
188.00

B. Marjorie Sanders
Full Name (Last, First, Middle Initial)
Marjorie Sanders
Mailing Address 572 Alta Vista Way
City Laguna Beach State CA Zip Code 92651
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Artist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **330.00**

Date of Receipt
12 / 20 / 2014
Transaction ID : 4239240
Amount of Each Receipt this Period
15.00

C. Rev. Joanne Sanders
Full Name (Last, First, Middle Initial)
Rev. Joanne Sanders
Mailing Address 732 Laural Avenue
City Menlo Park State CA Zip Code 94025
FEC ID number of contributing federal political committee. **C**
Name of Employer Stanford University Occupation Associate Dean For Religious Life
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234227
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... **253.00**
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 1441 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dicksie Sandifer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014
Mailing Address 240 Linden Dr.		Transaction ID : 4237423
City Boulder	State CO	Zip Code 80304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Avu Sankaralingam		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014
Mailing Address 4494 Juneberry Court		Transaction ID : 4234433
City Concord	State CA	Zip Code 94521
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Ibm	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Avu Sankaralingam		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014
Mailing Address 4494 Juneberry Court		Transaction ID : 4244764
City Concord	State CA	Zip Code 94521
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Ibm	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 1442 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Annette Sanon
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 Porter St
 City Elmont State NY Zip Code 11003
 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 ▼ 275.00

Date of Receipt
 12 / 06 / 2014
Transaction ID : 4232552
 Amount of Each Receipt this Period
 25.00

B. Robert Santoro
 Full Name (Last, First, Middle Initial)
 Mailing Address 1647 North Cherry Hill Road
 City State College State PA Zip Code 16803
 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 ▼ 445.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4232042
 Amount of Each Receipt this Period
 15.00

C. Rhetta Sapp
 Full Name (Last, First, Middle Initial)
 Mailing Address 1106 Fernbank Dr
 City Madison State TN Zip Code 37115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Terracon Occupation Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4233319
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 1443 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Socorro Sargent

Mailing Address 6757 Gato Rd.

City State Zip Code
El Paso TX 79932

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236337

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Patricia Sarvis

Mailing Address P.O. Box 1737

City State Zip Code
Murphys CA 95247

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232540

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Ms. Joan Saso

Mailing Address 4144 SE Henderson St.

City State Zip Code
Portland OR 97202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

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 / 26 / 2014
Transaction ID : 4227688

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00

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 1444 OF 2648
	<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)
EMILY's List

A. Ms. Terry J. Satterlee
Full Name (Last, First, Middle Initial)

Mailing Address 8106 NW Walnut Way

City Parkville State MO Zip Code 64152

FEC ID number of contributing federal political committee. **C**

Name of Employer Lathrope & Gage Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231500

Amount of Each Receipt this Period
 125.00

B. Ms. Martha Saudek
Full Name (Last, First, Middle Initial)

Mailing Address 845 East Bonita Ave, L-3

City Pomona State CA Zip Code 91767

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235321

Amount of Each Receipt this Period
 100.00

C. Alice Saunders
Full Name (Last, First, Middle Initial)

Mailing Address 711 Cedar Club Circle

City Chapel Hill State NC Zip Code 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2014
Transaction ID : 4239357

Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 260.00

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 1445 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Alice Saunders		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237895
Mailing Address 711 Cedar Club Circle		Amount of Each Receipt this Period 50.00
City Chapel Hill	State NC	Zip Code 27517
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Full Name (Last, First, Middle Initial) B. Ms. Judith M. Saunders		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4238906
Mailing Address 1789 North Marengo Avenue		Amount of Each Receipt this Period 50.00
City Pasadena	State CA	Zip Code 91103
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 ▼ 635.00	

Full Name (Last, First, Middle Initial) C. Mr. Van Sauve		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4231885
Mailing Address 4322 Vindale Lane		Amount of Each Receipt this Period 15.00
City Byers	State CO	Zip Code 80103
FEC ID number of contributing federal political committee. C		
Name of Employer U.S. Government Retiree	Occupation U.S. Government Retiree	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 1446 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. William D. Savedoff		Date of Receipt
Mailing Address 25 Meadow Road		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Arrowsic State ME Zip Code 04530		Transaction ID : 4229666
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer Social Insight	Occupation Economist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="350.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. William D. Savedoff		Date of Receipt
Mailing Address 25 Meadow Road		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City Arrowsic State ME Zip Code 04530		Transaction ID : 4238907
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer Social Insight	Occupation Economist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="350.00"/>	

Full Name (Last, First, Middle Initial) C. Mr. William D. Savedoff		Date of Receipt
Mailing Address 25 Meadow Road		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Arrowsic State ME Zip Code 04530		Transaction ID : 4241296
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer Social Insight	Occupation Economist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="350.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1447 OF 2648
	<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)
EMILY's List

A. Ms. Beverly B. Savitt
Full Name (Last, First, Middle Initial)

Mailing Address 9 Fern Ave

City Belvedere State CA Zip Code 94920

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : 4237276

Amount of Each Receipt this Period
 100.00

B. Ms. Beverly B. Savitt
Full Name (Last, First, Middle Initial)

Mailing Address 9 Fern Ave

City Belvedere State CA Zip Code 94920

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : 4237277

Amount of Each Receipt this Period
 100.00

C. Ms. Lisa J. Savitt
Full Name (Last, First, Middle Initial)

Mailing Address 5824 Bradley Blvd

City Bethesda State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 238.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014

Transaction ID : 4234638

Amount of Each Receipt this Period
 38.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 238.00

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 1448 OF 2648
	<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)
EMILY's List

A. Doreen Sawicki
Full Name (Last, First, Middle Initial)
Mailing Address 3015 NE 49th Avenue
City Portland State OR Zip Code 97213
FEC ID number of contributing federal political committee. **C**
Name of Employer Not Currently Employed Occupation Grower/Horticulturist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 12 / 27 / 2014
Transaction ID : 4240970
Amount of Each Receipt this Period 250.00

B. Ms. Cynthia Sawtell
Full Name (Last, First, Middle Initial)
Mailing Address 16 Hampton Ave
City San Anselmo State CA Zip Code 94960
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 350.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4231707
Amount of Each Receipt this Period 25.00

C. Ms. Rochelle Sax
Full Name (Last, First, Middle Initial)
Mailing Address 814 Saint Elizabeth Dr Apt 266
City San Jose State CA Zip Code 95126
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 240.00

Date of Receipt 12 / 05 / 2014
Transaction ID : 4232878
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 295.00
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 1449 OF 2648
	(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

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)
EMILY's List

A. Becky Saylor
Full Name (Last, First, Middle Initial)

Mailing Address 10326 W Highwood Ln

City Sun City State AZ Zip Code 85373

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Disabled Disabled

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **311.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2014
Transaction ID : 4240955

Amount of Each Receipt this Period
5.00

B. Becky Saylor
Full Name (Last, First, Middle Initial)

Mailing Address 10326 W Highwood Ln

City Sun City State AZ Zip Code 85373

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Disabled Disabled

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **311.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2014
Transaction ID : 4240956

Amount of Each Receipt this Period
10.00

C. Becky Saylor
Full Name (Last, First, Middle Initial)

Mailing Address 10326 W Highwood Ln

City Sun City State AZ Zip Code 85373

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Disabled Disabled

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **311.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2014
Transaction ID : 4242796

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **25.00**

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 1450 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Becky Saylor
Full Name (Last, First, Middle Initial)

Mailing Address 10326 W Highwood Ln

City Sun City State AZ Zip Code 85373

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Disabled Disabled

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **311.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235515

Amount of Each Receipt this Period
15.00

B. Becky Saylor
Full Name (Last, First, Middle Initial)

Mailing Address 10326 W Highwood Ln

City Sun City State AZ Zip Code 85373

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Disabled Disabled

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **311.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237904

Amount of Each Receipt this Period
15.00

C. Ms. Patrice Sayre
Full Name (Last, First, Middle Initial)

Mailing Address 1502 NE Trilein Dr.

City Ankeny State IA Zip Code 50021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Board Of Regents State Of Iowa Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236701

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **55.00**

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 1451 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jill Schabel
 Full Name (Last, First, Middle Initial)
 Mailing Address 7976 County Road I
 City Custer State WI Zip Code 54423
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232809
 Amount of Each Receipt this Period
 200.00

B. Ms. Ann Terbush Schaefer
 Full Name (Last, First, Middle Initial)
 Mailing Address 6211 Madawaska Rd.
 City Bethesda State MD Zip Code 20816
 Name of Employer None Occupation None
 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
 12 / 31 / 2014
Transaction ID : 4243119
 Amount of Each Receipt this Period
 100.00

C. Elizabeth Schaeffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Riverwoods Drive Apt D213
 City Exeter State NH Zip Code 03833
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238909
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
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 1452 OF 2648
	<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)
EMILY's List

A. Elizabeth Schaeffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Riverwoods Drive Apt D213
 City Exeter State NH Zip Code 03833
 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 ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235457
 Amount of Each Receipt this Period
 30.00

B. Helen Schaeffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 815 S Knight Ave
 City Park Ridge State IL Zip Code 60068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St Edwards School Occupation Preschool Aide
 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
 12 / 03 / 2014
Transaction ID : 4232057
 Amount of Each Receipt this Period
 5.00

C. Helen Schaeffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 815 S Knight Ave
 City Park Ridge State IL Zip Code 60068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St Edwards School Occupation Preschool Aide
 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
 12 / 03 / 2014
Transaction ID : 4232058
 Amount of Each Receipt this Period
 5.00

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 1453 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Pamela Schafer		Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2014 Transaction ID : 4235095
Mailing Address 7100 E Lincoln Dr 2161		Amount of Each Receipt this Period 95.00
City Scottsdale	State AZ	Zip Code 85253
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. Pamela Schafer		Date of Receipt M M / D D / Y Y Y Y 12 / 02 / 2014 Transaction ID : 4231399
Mailing Address 7100 E Lincoln Dr 2161		Amount of Each Receipt this Period 50.00
City Scottsdale	State AZ	Zip Code 85253
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. Michal Schafer		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234602
Mailing Address 16920 Four Seasons Dr		Amount of Each Receipt this Period 10.00
City Dumfries	State VA	Zip Code 22025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 1454 OF 2648
	<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)
EMILY's List

A. Michal Schafer
Full Name (Last, First, Middle Initial)

Mailing Address 16920 Four Seasons Dr

City Dumfries State VA Zip Code 22025

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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4230076

Amount of Each Receipt this Period
 15.00

B. Michal Schafer
Full Name (Last, First, Middle Initial)

Mailing Address 16920 Four Seasons Dr

City Dumfries State VA Zip Code 22025

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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014

Transaction ID : 4240704

Amount of Each Receipt this Period
 15.00

c. Ms. Grace B. Schaible
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 61560

City Fairbanks State AK Zip Code 99706

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
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4239513

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00

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 1455 OF 2648
	<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)
EMILY's List

A. Mrs. Georgia A Schall
Full Name (Last, First, Middle Initial)

Mailing Address 210 Club Drive

City Novato State CA Zip Code 94945

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4236960

Amount of Each Receipt this Period
200.00

B. Richard E. Schallert
Full Name (Last, First, Middle Initial)

Mailing Address 190 Twin Harbor Drive

City Winneconne State WI Zip Code 54986

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 ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4229263

Amount of Each Receipt this Period
15.00

C. Richard E. Schallert
Full Name (Last, First, Middle Initial)

Mailing Address 190 Twin Harbor Drive

City Winneconne State WI Zip Code 54986

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 ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4242317

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....▶	230.00
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 1456 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Corrente Schankler
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 Essex Street
 City New York State NY Zip Code 10002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Florist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230179
 Amount of Each Receipt this Period
 100.00

B. Ms. Corrente Schankler
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 Essex Street
 City New York State NY Zip Code 10002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Florist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240111
 Amount of Each Receipt this Period
 100.00

C. Ms. Susan L. Scharoun
 Full Name (Last, First, Middle Initial)
 Mailing Address 4549 Ashfield Terrace
 City Syracuse State NY Zip Code 13215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Le Moyne College Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233696
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 1457 OF 2648
	<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)
EMILY's List

A. Ms. Joy Schary
Full Name (Last, First, Middle Initial)
Mailing Address 14412 Benefit St. #3
City Sherman Oaks State CA Zip Code 91423
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Psychoanalyst
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 10 / 2014
Transaction ID : 4234590
Amount of Each Receipt this Period
15.00

B. Leslie Schatzberg
Full Name (Last, First, Middle Initial)
Mailing Address 329 Contra Costa Ave
City Ventura State CA Zip Code 93004
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Antiques
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4230104
Amount of Each Receipt this Period
20.00

C. Leslie Schatzberg
Full Name (Last, First, Middle Initial)
Mailing Address 329 Contra Costa Ave
City Ventura State CA Zip Code 93004
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Antiques
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240729
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 1458 OF 2648
	<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)
EMILY's List

A. Ms. Mary Lee Schell
Full Name (Last, First, Middle Initial)
Mailing Address 2065 Crestview Way
City Naples State FL Zip Code 34119
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 ▼ 210.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230767
Amount of Each Receipt this Period
100.00

B. Ms. Betty Schelske
Full Name (Last, First, Middle Initial)
Mailing Address 2738 SW 9th Dr
City Gainesville State FL Zip Code 32601
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 ▼ 525.00

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240297
Amount of Each Receipt this Period
75.00

c. Mary Schild
Full Name (Last, First, Middle Initial)
Mailing Address 4151 Anglin Rd.
City Columbus State GA Zip Code 31907
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 ▼ 220.00

Date of Receipt
11 / 28 / 2014
Transaction ID : 4229266
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
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 1459 OF 2648
	<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)
EMILY's List

A. Mary Schild
Full Name (Last, First, Middle Initial)
Mailing Address 4151 Anglin Rd.
City Columbus State GA Zip Code 31907
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 **220.00**

Date of Receipt **12 / 28 / 2014**
Transaction ID : 4242318
Amount of Each Receipt this Period **10.00**

B. Patricia Schille
Full Name (Last, First, Middle Initial)
Mailing Address 20893 2nd Place SW
City Normandy Park State WA Zip Code 98166
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **245.00**

Date of Receipt **11 / 28 / 2014**
Transaction ID : 4229267
Amount of Each Receipt this Period **5.00**

C. Patricia Schille
Full Name (Last, First, Middle Initial)
Mailing Address 20893 2nd Place SW
City Normandy Park State WA Zip Code 98166
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **245.00**

Date of Receipt **12 / 28 / 2014**
Transaction ID : 4241555
Amount of Each Receipt this Period **5.00**

SUBTOTAL of Receipts This Page (optional)..... **20.00**
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 1460 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Patricia Schille
 Full Name (Last, First, Middle Initial)
 Mailing Address 20893 2nd Place SW
 City Normandy Park State WA Zip Code 98166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229942
 Amount of Each Receipt this Period
 10.00

B. Patricia Schille
 Full Name (Last, First, Middle Initial)
 Mailing Address 20893 2nd Place SW
 City Normandy Park State WA Zip Code 98166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240505
 Amount of Each Receipt this Period
 10.00

C. Ms. Tina Schiller
 Full Name (Last, First, Middle Initial)
 Mailing Address 12107 Tullamore Ct Unit 103
 City Lutherville Timonium State MD Zip Code 21093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4236020
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 1461 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Pat Schilling		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229268
Mailing Address 23 Morning Glory		Amount of Each Receipt this Period 60.00
City Irvine	State CA	Zip Code 92603
FEC ID number of contributing federal political committee. C		
Name of Employer Tugboat Software Inc.	Occupation Software Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1005.00	

Full Name (Last, First, Middle Initial) B. Pat Schilling		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242319
Mailing Address 23 Morning Glory		Amount of Each Receipt this Period 60.00
City Irvine	State CA	Zip Code 92603
FEC ID number of contributing federal political committee. C		
Name of Employer Tugboat Software Inc.	Occupation Software Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1005.00	

Full Name (Last, First, Middle Initial) C. Ms. Katherine R. Schimke		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233095
Mailing Address 444 4th St., Apt. 21		Amount of Each Receipt this Period 150.00
City Davis	State CA	Zip Code 95616
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Independent Color Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	270.00
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 1462 OF 2648
	<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)
EMILY's List

A. Ms. Jane E. Schimmel
 Full Name (Last, First, Middle Initial)
 Mailing Address 30677 Corral Dr.
 City Coarsegold State CA Zip Code 93614
 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 ▼
 440.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4233948
 Amount of Each Receipt this Period
 50.00

B. Mr. Ferdinand Schlapper , Sr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Quail Ridge Dr
 City Madison State WI Zip Code 53717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pds Services Pharmacist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231198
 Amount of Each Receipt this Period
 150.00

C. Mr. Mark Schlawin
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Meadow Run Road
 City Princeton Junction State NJ Zip Code 08550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Eacher
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239222
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional).....▶	500.00
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 1463 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Peter Schlenzka

Mailing Address P.O.Box 32

City State Zip Code
Tahoe City CA 96145

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 ▼
4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234300

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
B. Ms. Arlene C. Schler

Mailing Address 4835 Cordell Ave Apt 1308

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Georgia Regents University Program Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229270

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Ms. Arlene C. Schler

Mailing Address 4835 Cordell Ave Apt 1308

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Georgia Regents University Program Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242321

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	2040.00
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 1464 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Sarah Schloss		Date of Receipt 12 / 31 / 2014 Transaction ID : 4243528
Mailing Address 8057 Clubhouse Drive		Amount of Each Receipt this Period 250.00
City Suffolk	State VA	Zip Code 23433
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 500.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Joan Schloss		Date of Receipt 12 / 09 / 2014 Transaction ID : 4233843
Mailing Address 18736 Mayall Street		Amount of Each Receipt this Period 100.00
City Northridge	State CA	Zip Code 91324
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.00
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Gloria Schlossenberg		Date of Receipt 12 / 15 / 2014 Transaction ID : 4236854
Mailing Address 12704 S. Darnell St.		Amount of Each Receipt this Period 25.00
City Olathe	State KS	Zip Code 66062
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 225.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 1465 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Kate Schmeidler
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Guion Lane
 City Larchmont State NY Zip Code 10538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4235153
 Amount of Each Receipt this Period
 500.00

B. Mr. Alvin Schmertzler
 Full Name (Last, First, Middle Initial)
 Mailing Address 142 Chestnut Circle
 City Lincoln State MA Zip Code 01773
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243580
 Amount of Each Receipt this Period
 50.00

C. Ms. Maxine Schmidl
 Full Name (Last, First, Middle Initial)
 Mailing Address 2112 Greenleaf St.
 City Santa Ana State CA Zip Code 92706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 30 / 2014
Transaction ID : 4243024
 Amount of Each Receipt this Period
 500.00

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: (check only one)	PAGE 1466 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Vivian G. Schmidt		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230770
Mailing Address 2625 Regency Rd		Amount of Each Receipt this Period 50.00
City Bartlesville	State OK	Zip Code 74006
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 ▼ 255.00	

Full Name (Last, First, Middle Initial) B. Ms. Rosemary T Schmidt		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232061
Mailing Address 214 Loma Ave.		Amount of Each Receipt this Period 90.00
City Long Beach	State CA	Zip Code 90803
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 ▼ 1080.00	

Full Name (Last, First, Middle Initial) C. Priscilla Schmitz		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229271
Mailing Address 10110 Coveridge Dr		Amount of Each Receipt this Period 10.00
City Dallas	State TX	Zip Code 75238
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1467 OF 2648
	<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)
EMILY's List

A. Priscilla Schmitz
Full Name (Last, First, Middle Initial)
Mailing Address 10110 Coveridge Dr
City Dallas State TX Zip Code 75238
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt
12 / 28 / 2014
Transaction ID : 4241556
Amount of Each Receipt this Period
10.00

B. Mrs. Christina R. Schmitz
Full Name (Last, First, Middle Initial)
Mailing Address 28514 Coveridge Drive
City Rancho Palos Verdes State CA Zip Code 90275
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 ▼ 240.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231893
Amount of Each Receipt this Period
20.00

C. Mr. Glenn Schnadt
Full Name (Last, First, Middle Initial)
Mailing Address 20215 Coneflower Lane
City Richland Center State WI Zip Code 53581
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 ▼ 2900.00

Date of Receipt
12 / 30 / 2014
Transaction ID : 4242664
Amount of Each Receipt this Period
1200.00

SUBTOTAL of Receipts This Page (optional).....▶ 1230.00
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 1468 OF 2648
	<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)
EMILY's List

A. Mr. Kenneth C. Schneeberger
Full Name (Last, First, Middle Initial)

Mailing Address 605 Thilly Ave

City Columbia State MO Zip Code 65203

FEC ID number of contributing federal political committee. **C**

Name of Employer University Of Missouri Occupation Educator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **535.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : 4237261

Amount of Each Receipt this Period
350.00

B. Ms. Dovey Schneider
Full Name (Last, First, Middle Initial)

Mailing Address 49 staghound passage

City Corte Madera State CA Zip Code 94925

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 ▼ **357.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237914

Amount of Each Receipt this Period
100.00

C. Ms. Sari Rose Schneider
Full Name (Last, First, Middle Initial)

Mailing Address 9802 Mercerwood Dr.

City Mercer Island State WA Zip Code 98040

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Volunteer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014

Transaction ID : 4242532

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **385.00**

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 1469 OF 2648
	<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)
EMILY's List

A. Ms. Anne-Marice Schnetzler
Full Name (Last, First, Middle Initial)

Mailing Address 388 Main ST

City Morro Bay State CA Zip Code 93442

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 ▼ **342.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014

Transaction ID : 4227774

Amount of Each Receipt this Period
117.00

B. Mr. Barry Schnur
Full Name (Last, First, Middle Initial)

Mailing Address 4810 E. Andora Drive

City Scottsdale State AZ Zip Code 85254

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Computer Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2014

Transaction ID : 4235713

Amount of Each Receipt this Period
100.00

C. Dr. S L L. Schnur
Full Name (Last, First, Middle Initial)

Mailing Address 6009 Lincolnwood Ct

City Burke State VA Zip Code 22015

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **785.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2014

Transaction ID : 4234015

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	267.00
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 1470 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. S L L. Schnur
 Full Name (Last, First, Middle Initial)
 Mailing Address 6009 Lincolnwood Ct
 City State Zip Code
 Burke VA 22015
 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 ▼
 785.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235485
 Amount of Each Receipt this Period
 50.00

B. Ms. Kathryn W. Schoedler
 Full Name (Last, First, Middle Initial)
 Mailing Address 1069 S Downing St
 City State Zip Code
 Denver CO 80209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227792
 Amount of Each Receipt this Period
 300.00

C. Mr. Gary J. Schoennauer
 Full Name (Last, First, Middle Initial)
 Mailing Address 522 Quailbrook Ct
 City State Zip Code
 San Jose CA 95110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227681
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 1471 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Gail S. Schoettler
 Full Name (Last, First, Middle Initial)
 Mailing Address 11855 E. Daley Circle
 City Parker State CO Zip Code 80134
 Name of Employer REQUESTED Occupation Doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4232987
 Amount of Each Receipt this Period
 1000.00

B. Judy Scholl
 Full Name (Last, First, Middle Initial)
 Mailing Address 8560 NW 4th Street
 City Pembroke Pines State FL Zip Code 33024
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229274
 Amount of Each Receipt this Period
 20.00

C. Judy Scholl
 Full Name (Last, First, Middle Initial)
 Mailing Address 8560 NW 4th Street
 City Pembroke Pines State FL Zip Code 33024
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242323
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	1040.00
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 1472 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Stephen Scholle		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014
Mailing Address 5 Homewood Rd		Transaction ID : 4235106
City Hartsdale	State NY	Zip Code 10530
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 75.00	
Name of Employer Self	Occupation Self Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1550.00	

Full Name (Last, First, Middle Initial) B. Dr. Calvin R. Schoonhoven		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014
Mailing Address 85 Harvest Trail Ln		Transaction ID : 4236939
City Covington	State TN	Zip Code 38019
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00	
Name of Employer None	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00	

Full Name (Last, First, Middle Initial) C. Mr. Robert H. Schor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2014
Mailing Address 10 Ambassador Drive		Transaction ID : 4231400
City Rochester	State NY	Zip Code 14610
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 36.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2871.00	

SUBTOTAL of Receipts This Page (optional).....▶	126.00
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 1473 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert H. Schor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232049
Mailing Address 10 Ambassador Drive		Amount of Each Receipt this Period 40.00
City Rochester	State NY	Zip Code 14610
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2871.00	

Full Name (Last, First, Middle Initial) B. Mr. Robert H. Schor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232050
Mailing Address 10 Ambassador Drive		Amount of Each Receipt this Period 40.00
City Rochester	State NY	Zip Code 14610
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2871.00	

Full Name (Last, First, Middle Initial) C. Mr. Dewey Schorre		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4227679
Mailing Address 506 Crestview Dr.		Amount of Each Receipt this Period 225.00
City Ojai	State CA	Zip Code 93023
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	305.00
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 1474 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. John E. Schowalter		Date of Receipt 12 / 09 / 2014 Transaction ID : 4233839
Mailing Address 256 Ives Street		Amount of Each Receipt this Period 100.00
City Hamden	State CT	Zip Code 06518
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ms. Stephanie Schriock		Date of Receipt 12 / 16 / 2014 Transaction ID : 4237147
Mailing Address 3225 Valley Drive		Amount of Each Receipt this Period 200.00
City Alexandria	State VA	Zip Code 22302
FEC ID number of contributing federal political committee. C		
Name of Employer Emily's List	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2135.00	

Full Name (Last, First, Middle Initial) C. Vickey Schroeder		Date of Receipt 11 / 30 / 2014 Transaction ID : 4229566
Mailing Address 4439 54th Ave.S.W.		Amount of Each Receipt this Period 15.00
City Seattle	State WA	Zip Code 98116
FEC ID number of contributing federal political committee. C		
Name of Employer Westview Dental	Occupation Dental Hygienist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....▶	315.00
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 1475 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Vickey Schroeder		Date of Receipt
Mailing Address 4439 54th Ave.S.W.		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4238916
Seattle	WA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="15.00"/>
Name of Employer	Occupation	
Westview Dental	Dental Hygienist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Vickey Schroeder		Date of Receipt
Mailing Address 4439 54th Ave.S.W.		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4242324
Seattle	WA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="15.00"/>
Name of Employer	Occupation	
Westview Dental	Dental Hygienist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Faye Schuett		Date of Receipt
Mailing Address 23211 Cass Avenue		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4229276
Farmington	MI	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="100.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="130.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1476 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Faye Schuett
 Full Name (Last, First, Middle Initial)
 Mailing Address 23211 Cass Avenue
 City Farmington State MI Zip Code 48335
 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 ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241752
 Amount of Each Receipt this Period
 100.00

B. Constance M. Schulte
 Full Name (Last, First, Middle Initial)
 Mailing Address 1909 San Vincente Drive
 City Concord State CA Zip Code 94519
 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 ▼ 233.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243195
 Amount of Each Receipt this Period
 12.00

C. Mr. David P Schultz
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 624
 City Mattituck State NY Zip Code 11952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Long Island University - Riverhead Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228119
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 127.00
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 1477 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. David P Schultz
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 624
 City State Zip Code
 Mattituck NY 11952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Long Island University - Riverhead Professor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228118
 Amount of Each Receipt this Period
 50.00

B. Michael Schultz
 Full Name (Last, First, Middle Initial)
 Mailing Address 1324 Mount Vernon Drive
 City State Zip Code
 San Gabriel CA 91775
 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 ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236338
 Amount of Each Receipt this Period
 25.00

C. Ms. Marilyn Schultz
 Full Name (Last, First, Middle Initial)
 Mailing Address 215 Camino al Mar
 City State Zip Code
 Watsonville CA 95076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240117
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 1478 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Bette L. Schultz			Date of Receipt
Mailing Address 67 Candace Lane			<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4234669
Chatham	NJ	07928	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="1000.00"/>
Name of Employer	Occupation		
Self	Consultant		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2000.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mr. Paula Schwach			Date of Receipt
Mailing Address 1901 W. 48th Terrace			<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4232085
Westwood Hills	KS	66205	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="15.00"/>
Name of Employer	Occupation		
Us Dept Of Transportation/Fta	Attorney		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="335.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Lorraine Schwarm			Date of Receipt
Mailing Address 4036 Evanston Ave. N			<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4232080
Seattle	WA	98103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
Seattle Public Schools	Substitute		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1040.00"/>
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 1479 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. John W. Schwartz		Date of Receipt
Mailing Address 438 Michigan Hill Rd		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City Richford State NY Zip Code 13835		Transaction ID : 4235385
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer None Occupation None		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="255.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. John W. Schwartz		Date of Receipt
Mailing Address 438 Michigan Hill Rd		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City Richford State NY Zip Code 13835		Transaction ID : 4243358
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer None Occupation None		<input type="text" value="15.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="255.00"/>	

Full Name (Last, First, Middle Initial) C. Mrs. Amy M Schwartz		Date of Receipt
Mailing Address 41 Willets Pond Path		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City North Hills State NY Zip Code 11576		Transaction ID : 4229279
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer None Occupation None		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="530.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="35.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1480 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Amy M Schwartz
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Willets Pond Path
 City North Hills State NY Zip Code 11576
 Date of Receipt 12 / 13 / 2014
Transaction ID : 4236339
 Amount of Each Receipt this Period 10.00
 FEC ID number of contributing federal political committee. C
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

B. Mrs. Amy M Schwartz
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Willets Pond Path
 City North Hills State NY Zip Code 11576
 Date of Receipt 12 / 28 / 2014
Transaction ID : 4241557
 Amount of Each Receipt this Period 10.00
 FEC ID number of contributing federal political committee. C
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

C. Mrs. Amy M Schwartz
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Willets Pond Path
 City North Hills State NY Zip Code 11576
 Date of Receipt 11 / 28 / 2014
Transaction ID : 4229280
 Amount of Each Receipt this Period 15.00
 FEC ID number of contributing federal political committee. C
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 35.00
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 1481 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Amy M Schwartz		Date of Receipt 12 / 28 / 2014 Transaction ID : 4242326
Mailing Address 41 Willets Pond Path		Amount of Each Receipt this Period 15.00
City North Hills	State NY	Zip Code 11576
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 530.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 530.00	

Full Name (Last, First, Middle Initial) B. Dr. Robert D. Schwartz		Date of Receipt 12 / 01 / 2014 Transaction ID : 4231200
Mailing Address 2753 W. Bonnie Brook Ln.		Amount of Each Receipt this Period 50.00
City Waukegan	State IL	Zip Code 60087
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Dorothy D. Schwartz		Date of Receipt 12 / 14 / 2014 Transaction ID : 4235448
Mailing Address 21 Villa Ct.		Amount of Each Receipt this Period 25.00
City San Luis Obispo	State CA	Zip Code 93401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00
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 ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 1482 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Joel Schwartz

Mailing Address 207 Lincoln St.

City Newton Highlands	State MA	Zip Code 02461
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FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239183

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Thomas C. Schwartzburg

Mailing Address PO Box 3507

City Oakland	State CA	Zip Code 94609
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Bookbinder
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1450.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229281

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
c. Thomas C. Schwartzburg

Mailing Address PO Box 3507

City Oakland	State CA	Zip Code 94609
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Bookbinder
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1450.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241244

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 1483 OF 2648
	<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)
EMILY's List

A. Mrs. Barbara W. Schwarz
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Easton AV
 City White Plains State NY Zip Code 10605
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242799
 Amount of Each Receipt this Period
 100.00

B. Mrs. William Schwarze
 Full Name (Last, First, Middle Initial)
 Mailing Address 87 Pugh Rd.
 City Wayne State PA Zip Code 19087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cabrini Colege Occupation 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
 12 / 29 / 2014
Transaction ID : 4242631
 Amount of Each Receipt this Period
 250.00

C. Ms. Mary A. Scoblic
 Full Name (Last, First, Middle Initial)
 Mailing Address 421 McPherson Ave
 City Lansing State MI Zip Code 48915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rn-Aim The Registered Nurses Assn In M Occupation Administrator
 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
 12 / 03 / 2014
Transaction ID : 4232081
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 1484 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Yvonne Scolari		Date of Receipt
Mailing Address 11003 Francine Rd		M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014
City	State	Zip Code
Mountain Ranch	CA	95246
FEC ID number of contributing federal political committee. C		Transaction ID : 4230014
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		290.00

Full Name (Last, First, Middle Initial) B. Ms. Linda Scollins		Date of Receipt
Mailing Address 26 Houston St		M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
City	State	Zip Code
West Roxbury	MA	02132
FEC ID number of contributing federal political committee. C		Transaction ID : 4229283
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		390.00

Full Name (Last, First, Middle Initial) C. Ms. Linda Scollins		Date of Receipt
Mailing Address 26 Houston St		M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
City	State	Zip Code
West Roxbury	MA	02132
FEC ID number of contributing federal political committee. C		Transaction ID : 4242327
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		390.00

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 1485 OF 2648
	<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)
EMILY's List

A. Donna Scott
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 850

City Oilton	State OK	Zip Code 74052
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229772

Amount of Each Receipt this Period
35.00

B. Donna Scott
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 850

City Oilton	State OK	Zip Code 74052
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240807

Amount of Each Receipt this Period
35.00

C. Ms. Keitha Scott
Full Name (Last, First, Middle Initial)
Mailing Address 8634 Hollywood Blvd

City Los Angeles	State CA	Zip Code 90069
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232824

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 1486 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Keitha Scott		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4240118
Mailing Address 8634 Hollywood Blvd		Amount of Each Receipt this Period 15.00
City Los Angeles	State CA	Zip Code 90069
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1240.00	

Full Name (Last, First, Middle Initial) B. Ms. Keitha Scott		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237132
Mailing Address 8634 Hollywood Blvd		Amount of Each Receipt this Period 20.00
City Los Angeles	State CA	Zip Code 90069
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1240.00	

Full Name (Last, First, Middle Initial) C. Ms. Keitha Scott		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2014 Transaction ID : 4241012
Mailing Address 8634 Hollywood Blvd		Amount of Each Receipt this Period 100.00
City Los Angeles	State CA	Zip Code 90069
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1240.00	

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 1487 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Laura J. Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 1031 Forest Lakes Drive
 City Naples State FL Zip Code 34105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2285.00

Date of Receipt
 12 / 11 / 2014
Transaction ID : 4235015
 Amount of Each Receipt this Period
 35.00

B. Ms. Laura J. Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 1031 Forest Lakes Drive
 City Naples State FL Zip Code 34105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2285.00

Date of Receipt
 12 / 30 / 2014
Transaction ID : 4243027
 Amount of Each Receipt this Period
 250.00

C. Cecelia Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 1352 Westhampton Road
 City Florence State MA Zip Code 01062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Psychotherapist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 11 / 28 / 2014
Transaction ID : 4229285
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 295.00
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 1488 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Cecelia Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 1352 Westhampton Road
 City Florence State MA Zip Code 01062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Psychotherapist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242328
 Amount of Each Receipt this Period
 10.00

B. Rosa Lee K. Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 2123 Glen Garden Dr
 City Denton State TX Zip Code 76207
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229284
 Amount of Each Receipt this Period
 10.00

C. Rosa Lee K. Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 2123 Glen Garden Dr
 City Denton State TX Zip Code 76207
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241774
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 1489 OF 2648
	<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)
EMILY's List

A. Ms. Kathleen Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 2209 Sutter View Lane
 City Lincoln State CA Zip Code 95648
 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 ▼ 210.00

Date of Receipt
 12 / 09 / 2014
Transaction ID : 4234166
 Amount of Each Receipt this Period
 10.00

B. Norman Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 N.86thst
 City Kansas City State KS Zip Code 66112
 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 ▼ 210.00

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231402
 Amount of Each Receipt this Period
 15.00

C. Norman Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 N.86thst
 City Kansas City State KS Zip Code 66112
 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 ▼ 210.00

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4238921
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 1490 OF 2648
	<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)
EMILY's List

A. Ms. Kathleen Scott
Full Name (Last, First, Middle Initial)

Mailing Address 2209 Sutter View Lane

City Lincoln State CA Zip Code 95648

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 ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014

Transaction ID : 4228122

Amount of Each Receipt this Period
200.00

B. Alan Scott
Full Name (Last, First, Middle Initial)

Mailing Address 3716 SE 13th Avenue

City Portland State OR Zip Code 97202

FEC ID number of contributing federal political committee. **C**

Name of Employer The Cadmus Group Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2014

Transaction ID : 4231606

Amount of Each Receipt this Period
15.00

C. Ms. Susan Scott
Full Name (Last, First, Middle Initial)

Mailing Address 7025 Ottawa RD NE

City Albuquerque State NM Zip Code 87110

FEC ID number of contributing federal political committee. **C**

Name of Employer University Of New Mexico School Of Med Occupation Physician

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
12 / 29 / 2014

Transaction ID : 4242520

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 1491 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Belinda J. Seal-Sweet
 Full Name (Last, First, Middle Initial)
 Mailing Address 5270 Bronco Drive
 City Clarkston State MI Zip Code 48346
 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 ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231202
 Amount of Each Receipt this Period
 100.00

B. Michael Seaman
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 Priscilla Lane
 City Schenectady State NY Zip Code 12306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240120
 Amount of Each Receipt this Period
 15.00

C. Ms. Kathy Seaton
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 426
 City Big Oak Flat State CA Zip Code 95305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239660
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	215.00
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 1492 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margaret H. Sedenquist
 Full Name (Last, First, Middle Initial)
 Mailing Address 1575 Riviera Dr.
 City Pasadena State CA Zip Code 91107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mohawk Management Crop Occupation Property Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240331
 Amount of Each Receipt this Period
 125.00

B. Ms. Alison R. Seevak
 Full Name (Last, First, Middle Initial)
 Mailing Address 1079 Neilson St.
 City Albany State CA Zip Code 94706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242627
 Amount of Each Receipt this Period
 250.00

C. Dr. Marcia Segal
 Full Name (Last, First, Middle Initial)
 Mailing Address 2637 Whittier Ave
 City Louisville State KY Zip Code 40205
 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 ▼ 376.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234652
 Amount of Each Receipt this Period
 188.00

SUBTOTAL of Receipts This Page (optional).....▶	563.00
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 1494 OF 2648
	<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)
EMILY's List

A. Erika Seibel
Full Name (Last, First, Middle Initial)

Mailing Address 1173 Thomas-84 Rd

City State Zip Code
Eighty Four PA 15330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Country Meadows Retirement Community Marketing Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014

Transaction ID : 4237916

Amount of Each Receipt this Period
15.00

B. Ms. Grace Seiberling
Full Name (Last, First, Middle Initial)

Mailing Address 49 Boardman St

City State Zip Code
Rochester NY 14607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : 4234705

Amount of Each Receipt this Period
200.00

C. Mr. Richard Seid
Full Name (Last, First, Middle Initial)

Mailing Address 950 N. Michigan Ave.

City State Zip Code
Chicago IL 60611

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
12 / 18 / 2014

Transaction ID : 4238156

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 465.00

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 1495 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Leonora Seid
Full Name (Last, First, Middle Initial)
Mailing Address 92 Dosoris Lane
City State Zip Code
Glen Cove NY 11542
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 ▼
230.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014
Transaction ID : 4228123
Amount of Each Receipt this Period
15.00

B. Leonora Seid
Full Name (Last, First, Middle Initial)
Mailing Address 92 Dosoris Lane
City State Zip Code
Glen Cove NY 11542
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 ▼
230.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240665
Amount of Each Receipt this Period
15.00

C. Ms. Susan Seidel
Full Name (Last, First, Middle Initial)
Mailing Address 425 East 63rd Street
City State Zip Code
New York NY 10065
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self Art Dealer
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1450.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2014
Transaction ID : 4232566
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 1496 OF 2648
	<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)
EMILY's List

A. Dr. Robert T. Self
Full Name (Last, First, Middle Initial)
Mailing Address 252 Charles St
City Sycamore State IL Zip Code 60178
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 ▼ 305.00

Date of Receipt 11 / 28 / 2014
Transaction ID : 4229290
Amount of Each Receipt this Period 15.00

B. Dr. Robert T. Self
Full Name (Last, First, Middle Initial)
Mailing Address 252 Charles St
City Sycamore State IL Zip Code 60178
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 ▼ 305.00

Date of Receipt 12 / 28 / 2014
Transaction ID : 4242331
Amount of Each Receipt this Period 15.00

C. Mr. Edward M Selfe
Full Name (Last, First, Middle Initial)
Mailing Address 3664 Lohe Rd
City Kalaheo State HI Zip Code 96741
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Musician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 12 / 20 / 2014
Transaction ID : 4239250
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 1497 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Marilyn Sellman
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 N Tamiami Trl Unit 1610
 City Sarasota State FL Zip Code 34236
 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 ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240304
 Amount of Each Receipt this Period
 375.00

B. Ms. Eliza Sells
 Full Name (Last, First, Middle Initial)
 Mailing Address 30955 Runnymede St.
 City Farmington Hills State MI Zip Code 48334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Self Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232461
 Amount of Each Receipt this Period
 25.00

C. Ms. Virginia L. Senders
 Full Name (Last, First, Middle Initial)
 Mailing Address 305 Spencer Dr.
 City Amherst State MA Zip Code 01002
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233662
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	420.00
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 1498 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Barbara Sentell
 Full Name (Last, First, Middle Initial)
 Mailing Address 307 16th Street
 City Seal Beach State CA Zip Code 90740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234888
 Amount of Each Receipt this Period
 50.00

B. Ms. Judith Senteney
 Full Name (Last, First, Middle Initial)
 Mailing Address 724 Park Ln.
 City Billings State MT Zip Code 59102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4231204
 Amount of Each Receipt this Period
 150.00

C. Ms. Kathleen Serrapede
 Full Name (Last, First, Middle Initial)
 Mailing Address 16792 N 108TH Way
 City Scottsdale State AZ Zip Code 85255
 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 ▼
 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243160
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
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 1499 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Annette Serrurier		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 06 / 2014 Transaction ID : 4232581
Mailing Address 700 S. Lake Ave. #106		Amount of Each Receipt this Period 30.00
City Pasadena	State CA	Zip Code 91106
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 ▼ 410.00	

Full Name (Last, First, Middle Initial) B. Ms. Alice Lewis Sessions		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237120
Mailing Address 3920 Argyle Terrace		Amount of Each Receipt this Period 30.00
City Washington	State DC	Zip Code 20011
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 ▼ 360.00	

Full Name (Last, First, Middle Initial) C. Ms. Cynthia L. Sevilla		Date of Receipt M M M / D D D / Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227536
Mailing Address 3325 E Clarkston Rd.		Amount of Each Receipt this Period 75.00
City Oakland	State MI	Zip Code 48363
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 1500 OF 2648
	<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)
EMILY's List

A. Toni Sewall-Mueller
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1178

City Waldport	State OR	Zip Code 97394
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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 ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2014

Transaction ID : 4233649

Amount of Each Receipt this Period
15.00

B. Ms. Gail M. Sexton
Full Name (Last, First, Middle Initial)
Mailing Address 3838 Terra Granada Dr., Apt. 2b

City Walnut Creek	State CA	Zip Code 94595
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	16	/	2014

Transaction ID : 4237175

Amount of Each Receipt this Period
25.00

C. Mr. Allen Sexton
Full Name (Last, First, Middle Initial)
Mailing Address 529 Seminole Dr

City Montgomery	State AL	Zip Code 36117
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation 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
12	/	12	/	2014

Transaction ID : 4235975

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 1501 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Christine Seyl			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229292		
Mailing Address 500 E Maryland			Amount of Each Receipt this Period 50.00		
City Bellingham	State WA	Zip Code 98225			
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 ▼ 450.00			

Full Name (Last, First, Middle Initial) B. Christine Seyl			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241753		
Mailing Address 500 E Maryland			Amount of Each Receipt this Period 50.00		
City Bellingham	State WA	Zip Code 98225			
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 ▼ 450.00			

Full Name (Last, First, Middle Initial) C. Ms. Sally Seymour			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232071		
Mailing Address 1517 5th Ave. Apt. A			Amount of Each Receipt this Period 10.00		
City San Rafael	State CA	Zip Code 94901			
FEC ID number of contributing federal political committee. C					
Name of Employer None		Occupation None			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00			

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 1502 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Judith Shafer		Date of Receipt 12 / 09 / 2014 Transaction ID : 4234038
Mailing Address 7460 Song Lake Rd		Amount of Each Receipt this Period 25.00
City Tully	State NY	Zip Code 13159
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Melissa Shakman		Date of Receipt 12 / 20 / 2014 Transaction ID : 4239232
Mailing Address 1360 E 56 Street		Amount of Each Receipt this Period 5.00
City Chicago	State IL	Zip Code 60637
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

Full Name (Last, First, Middle Initial) C. Rhona Shanker		Date of Receipt 12 / 03 / 2014 Transaction ID : 4232040
Mailing Address 14219 Manifest Way		Amount of Each Receipt this Period 10.00
City North Potomac	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		
Name of Employer Z & B Enterprises, Inc.	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 1503 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mary M. Shanklin

Mailing Address 275 N. Chapman Road

City State Zip Code
Doylestown PA 18901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236781

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Ms. Marsha B. Shanle

Mailing Address 504 California St.

City State Zip Code
Santa Cruz CA 95060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Atty

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
 12 / 05 / 2014
Transaction ID : 4232927

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Claire Shannon

Mailing Address 3121 Edinburgh Dr.

City State Zip Code
Augusta GA 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233281

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00

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 1504 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sarene P. Shanus		Date of Receipt
Mailing Address 347 Orienta Avenue		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Mamaroneck	NY	10543
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4237148
Name of Employer	Occupation	Amount of Each Receipt this Period
Harlorn, Llc	Manager	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Virginia M. Shapard		Date of Receipt
Mailing Address 2251 Jackson Road		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Griffin	GA	30223
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4236872
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="830.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Virginia M. Shapard		Date of Receipt
Mailing Address 2251 Jackson Road		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Griffin	GA	30223
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4236871
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="830.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="415.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1505 OF 2648
	<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)
EMILY's List

A. Daniel Shapiro
Full Name (Last, First, Middle Initial)
Mailing Address 25 Wentworth Manor Dr.
City Amherst State MA Zip Code 01002
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2235.00

Date of Receipt
12 / 02 / 2014
Transaction ID : 4231403
Amount of Each Receipt this Period
100.00

B. Allan Shapiro
Full Name (Last, First, Middle Initial)
Mailing Address 180 Chickering Rd., Unit 108 C
City North Andover State MA Zip Code 01845
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 ▼ 360.00

Date of Receipt
12 / 10 / 2014
Transaction ID : 4234452
Amount of Each Receipt this Period
30.00

C. Ms. Arlene Shapiro
Full Name (Last, First, Middle Initial)
Mailing Address 100 Glenview PI Apt 707
City Naples State FL Zip Code 34108
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 ▼ 650.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231456
Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 280.00
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 1506 OF 2648
	<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)
EMILY's List

A. Ms. Judith Shapiro
Full Name (Last, First, Middle Initial)

Mailing Address 138 Montrose Ave., Apt. 9

City Bryn Mawr	State PA	Zip Code 19010
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FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

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
12	/	01	/	2014

Transaction ID : 4230780

Amount of Each Receipt this Period
150.00

B. Ms. Mary Shapiro
Full Name (Last, First, Middle Initial)

Mailing Address 5003 Palmetto Ave Apt 94

City Pacifica	State CA	Zip Code 94044
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	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
12	/	13	/	2014

Transaction ID : 4236340

Amount of Each Receipt this Period
15.00

c. Marlene Sharland
Full Name (Last, First, Middle Initial)

Mailing Address 111 N. Ashley St., Ste. 611

City Ann Arbor	State MI	Zip Code 48104
-------------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2014

Transaction ID : 4235474

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	190.00
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 1507 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jonnie Sharp		Date of Receipt 12 / 28 / 2014 Transaction ID : 4241811
Mailing Address 15465 Riverside Drive		Amount of Each Receipt this Period 15.00
City Guerneville	State CA	Zip Code 95446
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Sustainable Community Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1365.00	

Full Name (Last, First, Middle Initial) B. Jonnie Sharp		Date of Receipt 11 / 28 / 2014 Transaction ID : 4229293
Mailing Address 15465 Riverside Drive		Amount of Each Receipt this Period 50.00
City Guerneville	State CA	Zip Code 95446
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Sustainable Community Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1365.00	

Full Name (Last, First, Middle Initial) C. Jonnie Sharp		Date of Receipt 12 / 28 / 2014 Transaction ID : 4241810
Mailing Address 15465 Riverside Drive		Amount of Each Receipt this Period 50.00
City Guerneville	State CA	Zip Code 95446
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Sustainable Community Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1365.00	

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 1508 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Paula Shatkin
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 453
 City Occidental State CA Zip Code 95465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Palm Drive Health Care Occupation Social Worker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 22 / 2014
Transaction ID : 4239444
 Amount of Each Receipt this Period
 35.00

B. Ms. Rhonna Shatz
 Full Name (Last, First, Middle Initial)
 Mailing Address 5453 Pond Bluff Court
 City West Bloomfield State MI Zip Code 48323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Henry Ford Hospital Occupation Neurologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240124
 Amount of Each Receipt this Period
 30.00

C. Mr. Jacob M. Shavit
 Full Name (Last, First, Middle Initial)
 Mailing Address 6505 Wilshire Blvd. Suite 825
 City Los Angeles State CA Zip Code 90048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Jewish Federation Occupation System Architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229827
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 1509 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Jacob M. Shavit		Date of Receipt
Mailing Address 6505 Wilshire Blvd. Suite 825		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4235473
Los Angeles	CA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="20.00"/>
Name of Employer	Occupation	
The Jewish Federation	System Architect	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="330.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Jacob M. Shavit		Date of Receipt
Mailing Address 6505 Wilshire Blvd. Suite 825		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4240125
Los Angeles	CA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="20.00"/>
Name of Employer	Occupation	
The Jewish Federation	System Architect	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="330.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Susan Shaw		Date of Receipt
Mailing Address 12453 W. Paseo Del Sol		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 4233619
Casa Grande	AZ	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="10.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="375.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="50.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1510 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Susan Shaw
 Full Name (Last, First, Middle Initial)
 Mailing Address 12453 W. Paseo Del Sol
 City State Zip Code
 Casa Grande AZ 85194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 23 / 2014
Transaction ID : 4240126
 Amount of Each Receipt this Period
 10.00

B. Mr. Leonard M. Shaw
 Full Name (Last, First, Middle Initial)
 Mailing Address 702-11th Ave East
 City State Zip Code
 Seattle WA 98102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Shrink
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229294
 Amount of Each Receipt this Period
 30.00

C. Mr. Leonard M. Shaw
 Full Name (Last, First, Middle Initial)
 Mailing Address 702-11th Ave East
 City State Zip Code
 Seattle WA 98102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Shrink
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242333
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 1511 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Abbey Shaw Linder		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2014
Mailing Address 256 Dorothy Ave.		Transaction ID : 4236021
City Ventura	State CA	Zip Code 93003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Rio School District	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) B. Ms. Eva Shaye		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 2405 Briarcrest Road		Transaction ID : 4236382
City Beverly Hills	State CA	Zip Code 90210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
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 ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Ms. C. Ann Sheehan		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2014
Mailing Address 206 S West St		Transaction ID : 4231586
City Carlisle	State PA	Zip Code 17013
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....▶	1060.00
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 1512 OF 2648
	<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)
EMILY's List

A. Kayla Sheets
Full Name (Last, First, Middle Initial)
Mailing Address 289 Pearl St
City Cambridge State MA Zip Code 02139
FEC ID number of contributing federal political committee. **C**
Name of Employer Mgh Occupation Genetic Counselor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **230.00**

Date of Receipt **12 / 12 / 2014**
Transaction ID : 4236002
Amount of Each Receipt this Period **15.00**

B. Dr. Conrad Sheff
Full Name (Last, First, Middle Initial)
Mailing Address 2504 5th St
City Tillamook State OR Zip Code 97141
FEC ID number of contributing federal political committee. **C**
Name of Employer Tillamook County Regional Hospital Occupation Urologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **360.00**

Date of Receipt **12 / 23 / 2014**
Transaction ID : 4240127
Amount of Each Receipt this Period **50.00**

C. Peggy Sheils
Full Name (Last, First, Middle Initial)
Mailing Address 2961 Fox Bluff Dr
City Saint Charles State MO Zip Code 63301
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Not Employed
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 15 / 2014**
Transaction ID : 4236717
Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **90.00**
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 1513 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Gregory Shenstone

Mailing Address 94 Pleasant St.

City Lexington State MA Zip Code 02421

FEC ID number of contributing federal political committee. **C**

Name of Employer Br+A Consulting Engineers Occupation Engineer

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
12 / 30 / 2014

Transaction ID : 4242959

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Lauren Sheppard

Mailing Address 6701 Mesa Drive

City Austin State TX Zip Code 78731

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Writer

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
12 / 23 / 2014

Transaction ID : 4240128

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Lauren Sheppard

Mailing Address 6701 Mesa Drive

City Austin State TX Zip Code 78731

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Writer

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
12 / 10 / 2014

Transaction ID : 4244743

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1514 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Linda B. Sherby

Mailing Address 3428 Pine Haven Cir

City State Zip Code
Boca Raton FL 33431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Psychologist

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
 12 / 01 / 2014
Transaction ID : 4231207

Amount of Each Receipt this Period
 125.00

Full Name (Last, First, Middle Initial)
B. Paula Sheridan

Mailing Address POB 2150

City State Zip Code
Granby CO 80446

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231861

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Paula Sheridan

Mailing Address POB 2150

City State Zip Code
Granby CO 80446

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238928

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

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 1515 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patricia C. Sheridan
 Full Name (Last, First, Middle Initial)
 Mailing Address 444 Enid Road
 City Jefferson State NY Zip Code 12093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Voice Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4190.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235475
 Amount of Each Receipt this Period
 20.00

B. Mr. Sanford Sherman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3639 Baker Ln.
 City Lafayette State CA Zip Code 94549
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229813
 Amount of Each Receipt this Period
 50.00

C. Mr. Sanford Sherman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3639 Baker Ln.
 City Lafayette State CA Zip Code 94549
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240129
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 1516 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lenda Sherrell		Date of Receipt
Mailing Address 1736 Timberwood Trace		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Monteagle	TN	37356
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="465.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>

Full Name (Last, First, Middle Initial) B. Lenda Sherrell		Date of Receipt
Mailing Address 1736 Timberwood Trace		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Monteagle	TN	37356
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="465.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>

Full Name (Last, First, Middle Initial) C. Lenda Sherrell		Date of Receipt
Mailing Address 1736 Timberwood Trace		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
Monteagle	TN	37356
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="465.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="55.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1517 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Stephanie S. Sherwin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Woodsong Dr
 City State Zip Code
 Roland AR 72135
 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 ▼
 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236686
 Amount of Each Receipt this Period
 15.00

B. Ms. Stephanie S. Sherwin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Woodsong Dr
 City State Zip Code
 Roland AR 72135
 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 ▼
 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4235101
 Amount of Each Receipt this Period
 20.00

C. Amy Sherwood
 Full Name (Last, First, Middle Initial)
 Mailing Address 233 Bainbridge Street
 City State Zip Code
 Philadelphia PA 19147
 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 ▼
 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240130
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 1518 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ann Shideler		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234047
Mailing Address 16220 N 7th St Apt 2169		Amount of Each Receipt this Period 10.00
City Phoenix	State AZ	
Zip Code 85022		Aggregate Year-to-Date ▼ 388.40
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 ▼ 388.40		

Full Name (Last, First, Middle Initial) B. Ms. Kristine Shields		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4232089
Mailing Address 17 Stover Park Rd		Amount of Each Receipt this Period 100.00
City Pipersville	State PA	
Zip Code 18947		Aggregate Year-to-Date ▼ 800.00
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Medical Writer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) C. Karen K. Shields		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014 Transaction ID : 4236022
Mailing Address 110 Hawthorne St		Amount of Each Receipt this Period 30.00
City Salinas	State CA	
Zip Code 93901		Aggregate Year-to-Date ▼ 660.00
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 ▼ 660.00		

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 1519 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cynthia J. Shilkret		Date of Receipt
Mailing Address 18 Jewett Ln.		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
South Hadley	MA	01075
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	
		Transaction ID : 4231209
		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Florence Shimano		Date of Receipt
Mailing Address 917 Jane Court		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Glen Ellen	CA	95442
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
County Of Marin	Chief Deputy Recorder	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Transaction ID : 4229302
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Florence Shimano		Date of Receipt
Mailing Address 917 Jane Court		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Glen Ellen	CA	95442
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
County Of Marin	Chief Deputy Recorder	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Transaction ID : 4242337
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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: (check only one)	PAGE 1520 OF 2648
	<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)
EMILY's List

A. Ms. Sallie Shippen
Full Name (Last, First, Middle Initial)
Mailing Address 756. 14th Way SW

City Edmonds	State WA	Zip Code 98020
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation 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
12	/	12	/	2014

Transaction ID : 4235222

Amount of Each Receipt this Period
100.00

B. Ms. Mary Sholkovitz
Full Name (Last, First, Middle Initial)
Mailing Address 16 Elvira Ave

City Falmouth	State MA	Zip Code 02540
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Music Teacher
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	15	/	2014

Transaction ID : 4236697

Amount of Each Receipt this Period
30.00

C. Ms. Carol D. Sholler
Full Name (Last, First, Middle Initial)
Mailing Address 453 Paddock Ln.

City Bristol	State RI	Zip Code 02809
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
-------------------------------	-------------------------

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
12	/	17	/	2014

Transaction ID : 4237512

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional).....▶	190.00
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 1521 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Janice Paradies Shoob
 Full Name (Last, First, Middle Initial)
 Mailing Address 4005 Beechwood Drive NW
 City Atlanta State GA Zip Code 30327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Designer
 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
 12 / 09 / 2014
Transaction ID : 4233833
 Amount of Each Receipt this Period
 100.00

B. Mr. Eric Shooter
 Full Name (Last, First, Middle Initial)
 Mailing Address 370 Golden Oak Dr.
 City Portola Valley State CA Zip Code 94028
 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 **1950.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239533
 Amount of Each Receipt this Period
 1000.00

C. Kayann Short
 Full Name (Last, First, Middle Initial)
 Mailing Address 5169 Ute Hwy
 City Longmont State CO Zip Code 80503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Writer/Farmer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **475.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236909
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... **1115.00**
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 1522 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kayann Short		Date of Receipt
Mailing Address 5169 Ute Hwy		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
Longmont	CO	80503
FEC ID number of contributing federal political committee.		Transaction ID : 4240131
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>
Name of Employer	Occupation	
Self	Writer/Farmer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="475.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Karen A. Shostak		Date of Receipt
Mailing Address 1372 Cuernavaca Circulo		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Mountain View	CA	94040
FEC ID number of contributing federal political committee.		Transaction ID : 4235218
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="125.00"/>
Name of Employer	Occupation	
St. Jude Medical	Tech. Writing	
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. Julie Shull		Date of Receipt
Mailing Address 909 SE Willow Ridge Drive		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Blue Springs	MO	64014
FEC ID number of contributing federal political committee.		Transaction ID : 4231405
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Kcp&L	Attorney	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="395.00"/>
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: (check only one)	PAGE 1523 OF 2648
	<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)
EMILY's List

A. Ms. Patricia D. Shure
Full Name (Last, First, Middle Initial)
Mailing Address 1127 Brooks Street
City Ann Arbor State MI Zip Code 48103
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 ▼
950.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2014
Transaction ID : 4243484
Amount of Each Receipt this Period
50.00

B. Mr. Richard P. Sibley
Full Name (Last, First, Middle Initial)
Mailing Address 2795 E. Harwell Rd.
City Gilbert State AZ Zip Code 85234
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Porter Brothers Security Guard
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
305.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4229307
Amount of Each Receipt this Period
20.00

C. Mr. Richard P. Sibley
Full Name (Last, First, Middle Initial)
Mailing Address 2795 E. Harwell Rd.
City Gilbert State AZ Zip Code 85234
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Porter Brothers Security Guard
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
305.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4242341
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 1524 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Marie Sickon Burke
 Full Name (Last, First, Middle Initial)
 Mailing Address 2833 Birch Harbor Lane
 City State Zip Code
 West Bloomfield MI 48324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Aclu Of Michigan Finance
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229308
 Amount of Each Receipt this Period
 50.00

B. Ms. Marie Sickon Burke
 Full Name (Last, First, Middle Initial)
 Mailing Address 2833 Birch Harbor Lane
 City State Zip Code
 West Bloomfield MI 48324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Aclu Of Michigan Finance
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243435
 Amount of Each Receipt this Period
 50.00

C. Asher Siebert
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 N 3rd Ave
 City State Zip Code
 Highland Park NJ 08904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Requested Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238933
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 1525 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Scott M. Sieburth
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 W Mill Rd
 City Flouertown State PA Zip Code 19031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Temple University Occupation 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
 12 / 06 / 2014
Transaction ID : 4232551
 Amount of Each Receipt this Period
 250.00

B. Mr. Scott M. Sieburth
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 W Mill Rd
 City Flouertown State PA Zip Code 19031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Temple University Occupation 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
 12 / 31 / 2014
Transaction ID : 4243512
 Amount of Each Receipt this Period
 25.00

C. Ms. Courtney K. Sieloff
 Full Name (Last, First, Middle Initial)
 Mailing Address 1352 Kennedy Street NW
 City Washington State DC Zip Code 20011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Burson Marsteller Occupation Digital Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233339
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 1526 OF 2648
	<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)
EMILY's List

A. Ms. Victoria Sievers
Full Name (Last, First, Middle Initial)
Mailing Address 14 Scenic Avenue

City San Rafael	State CA	Zip Code 94901
--------------------	-------------	-------------------

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 ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	30	/	2014

Transaction ID : 4242694

Amount of Each Receipt this Period

250.00

B. Ms. Mary Sievert
Full Name (Last, First, Middle Initial)
Mailing Address 2510 E. Roosevelt Road

City Ashley	State MI	Zip Code 48806
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **695.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2014

Transaction ID : 4239071

Amount of Each Receipt this Period

25.00

C. Gregg Siewert
Full Name (Last, First, Middle Initial)
Mailing Address 22372 Nutmeg Trl

City Kirksville	State MO	Zip Code 63501
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	27	/	2014

Transaction ID : 4228281

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 1527 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Gregg Siewert
 Full Name (Last, First, Middle Initial)
 Mailing Address 22372 Nutmeg Trl
 City Kirksville State MO Zip Code 63501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241143
 Amount of Each Receipt this Period
 10.00

B. Jennifer Sigler
 Full Name (Last, First, Middle Initial)
 Mailing Address 723 COUNTY ROAD 625
 City Hampton State NJ Zip Code 08827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236860
 Amount of Each Receipt this Period
 100.00

c. Mrs. Carol A. Sigoloff
 Full Name (Last, First, Middle Initial)
 Mailing Address 442 West Point Court
 City Saint Louis State MO Zip Code 63130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238934
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 1528 OF 2648
	<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)
EMILY's List

A. Ms. Barbara A. Sikes
Full Name (Last, First, Middle Initial)

Mailing Address 2 Bel Air Drive

City Sikeston State MO Zip Code 63801

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234037

Amount of Each Receipt this Period
50.00

B. Ms. Elinor Siklossy
Full Name (Last, First, Middle Initial)

Mailing Address 155 Seabreeze Avenue

City Palm Beach State FL Zip Code 33480

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Investment Adviser

Congaree Partnership

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230789

Amount of Each Receipt this Period
1200.00

C. Mr. Edward Silha
Full Name (Last, First, Middle Initial)

Mailing Address 11509 Pyreneese Drive

City Austin State TX Zip Code 78759

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Retired

None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232651

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	1260.00
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 1529 OF 2648
	<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)
EMILY's List

A. Mr. Edward Silha
Full Name (Last, First, Middle Initial)

Mailing Address 11509 Pyreneese Drive

City Austin State TX Zip Code 78759

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 ▼
225.00

Date of Receipt
 12 / 11 / 2014
Transaction ID : 4234940

Amount of Each Receipt this Period
10.00

B. Ms. Marjorie L. Sill
Full Name (Last, First, Middle Initial)

Mailing Address 720 Brookfield Dr.

City Reno State NV Zip Code 89503

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231213

Amount of Each Receipt this Period
50.00

C. Ms. Mary Helen Silva
Full Name (Last, First, Middle Initial)

Mailing Address 404 Willington Drive

City Silver Spring State MD Zip Code 20904

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4244522

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1060.00

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 1530 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Judith Silver
 Full Name (Last, First, Middle Initial)
 Mailing Address 444 East 20th Street Apartment 7c
 City State Zip Code
 New York NY 10009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1040.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243383
 Amount of Each Receipt this Period
 50.00

B. Ms. Frances Silver
 Full Name (Last, First, Middle Initial)
 Mailing Address 4810 N. Los Altos Pl.
 City State Zip Code
 Tucson AZ 85704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Requested Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229310
 Amount of Each Receipt this Period
 20.00

C. Ms. Frances Silver
 Full Name (Last, First, Middle Initial)
 Mailing Address 4810 N. Los Altos Pl.
 City State Zip Code
 Tucson AZ 85704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Requested Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242343
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 1531 OF 2648
	<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)
EMILY's List

A. Harriette Silverberg Natkins
Full Name (Last, First, Middle Initial)
Mailing Address 322 W. 72nd St.
City New York State NY Zip Code 10023
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 **275.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 19 / 2014
Transaction ID : 4238937
Amount of Each Receipt this Period
50.00

B. Mrs. Lila Silverman
Full Name (Last, First, Middle Initial)
Mailing Address 4054 Cranbrook Court
City Bloomfield Hills State MI Zip Code 48301
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 **3900.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 19 / 2014
Transaction ID : 4238938
Amount of Each Receipt this Period
75.00

C. Ms. Barbara Silverman
Full Name (Last, First, Middle Initial)
Mailing Address 9840 SW 63rd CT
City Miami State FL Zip Code 33156
FEC ID number of contributing federal political committee. **C**
Name of Employer Colson, Kicks, & Edison Occupation Attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **600.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4239677
Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... **425.00**
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 1532 OF 2648
	<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)
EMILY's List

A. Tina Silverman
Full Name (Last, First, Middle Initial)

Mailing Address 4216 34th Street

City Mount Rainier State MD Zip Code 20712

FEC ID number of contributing federal political committee. **C**

Name of Employer Dance Place Occupation Graphic Designer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4229311

Amount of Each Receipt this Period
 20.00

B. Tina Silverman
Full Name (Last, First, Middle Initial)

Mailing Address 4216 34th Street

City Mount Rainier State MD Zip Code 20712

FEC ID number of contributing federal political committee. **C**

Name of Employer Dance Place Occupation Graphic Designer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4242344

Amount of Each Receipt this Period
 20.00

C. Mr. Steven J. Silverman
Full Name (Last, First, Middle Initial)

Mailing Address 154 James Place

City Pittsburgh State PA Zip Code 15228

FEC ID number of contributing federal political committee. **C**

Name of Employer General Wire Spring Co Occupation Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014

Transaction ID : 4232888

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 1533 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Barbara C. Simmons
 Full Name (Last, First, Middle Initial)
 Mailing Address 322 Ten Eyck St.
 City Watertown State NY Zip Code 13601
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237115
 Amount of Each Receipt this Period
 25.00

B. Ms. Cheryl K. Simmons
 Full Name (Last, First, Middle Initial)
 Mailing Address 9779 EAGLE MTN DAM RD
 City Fort Worth State TX Zip Code 76135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Usda Nrcs Occupation Natural Resources Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229553
 Amount of Each Receipt this Period
 10.00

C. Ms. Cheryl K. Simmons
 Full Name (Last, First, Middle Initial)
 Mailing Address 9779 EAGLE MTN DAM RD
 City Fort Worth State TX Zip Code 76135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Usda Nrcs Occupation Natural Resources Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241380
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 1534 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Cheryl K. Simmons		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4234905	
Mailing Address 9779 EAGLE MTN DAM RD		Amount of Each Receipt this Period 35.00	
City Fort Worth	State TX	Zip Code 76135	
FEC ID number of contributing federal political committee. C			
Name of Employer Usda Nrcs	Occupation Natural Resources Specialist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		

Full Name (Last, First, Middle Initial) B. Ms. Cheryl K. Simmons		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241381	
Mailing Address 9779 EAGLE MTN DAM RD		Amount of Each Receipt this Period 100.00	
City Fort Worth	State TX	Zip Code 76135	
FEC ID number of contributing federal political committee. C			
Name of Employer Usda Nrcs	Occupation Natural Resources Specialist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		

Full Name (Last, First, Middle Initial) C. Catriona Simms		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233672	
Mailing Address 910 Ronald Ave		Amount of Each Receipt this Period 20.00	
City Missoula	State MT	Zip Code 59801	
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 ▼ 480.00		

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	155.00

**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 1535 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Catriona Simms

Mailing Address 910 Ronald Ave

City Missoula State MT Zip Code 59801

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 ▼ **480.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2014

Transaction ID : 4239107

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Ms. Carole M. Simon

Mailing Address 68 North Cedar Lake Drive West

City Columbia State MO Zip Code 65203

FEC ID number of contributing federal political committee. **C**

Name of Employer Dept. Of Veterans Affairs Occupation Pharmacist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **455.16**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014

Transaction ID : 4238940

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Ms. Ina Simon

Mailing Address 4032 Terra Granada Dr Apt 2

City Walnut Creek State CA Zip Code 94595

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 ▼ **235.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2014

Transaction ID : 4231471

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **65.00**

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 1536 OF 2648
	<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)
EMILY's List

A. Ms. Carolyn Simoneaux
Full Name (Last, First, Middle Initial)
Mailing Address 5375 Amick Rd
City Julian State NC Zip Code 27283
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 ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 08 / 2014
Transaction ID : 4233665
Amount of Each Receipt this Period
20.00

B. Geeta Simons
Full Name (Last, First, Middle Initial)
Mailing Address 56 S. 2nd Street
City Philadelphia State PA Zip Code 19106
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker / Graduate Student
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4230168
Amount of Each Receipt this Period
50.00

C. Geeta Simons
Full Name (Last, First, Middle Initial)
Mailing Address 56 S. 2nd Street
City Philadelphia State PA Zip Code 19106
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker / Graduate Student
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4240135
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 1537 OF 2648
	<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)
EMILY's List

A. Ms. Janet Hargis Simpson
Full Name (Last, First, Middle Initial)
Mailing Address 409 Cowgill Ave.
City Bellingham State WA Zip Code 98225
FEC ID number of contributing federal political committee. **C**
Name of Employer Catholic Comm Services Occupation Mental Health Professional
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 01 / 2014
Transaction ID : 4230792
Amount of Each Receipt this Period 100.00

B. Kathryn Simpson
Full Name (Last, First, Middle Initial)
Mailing Address 4146 25th Street
City San Francisco State CA Zip Code 94114
FEC ID number of contributing federal political committee. **C**
Name of Employer Golden Gate Regional Center Occupation Nurse
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4231873
Amount of Each Receipt this Period 25.00

C. Mr. James A. Simpson
Full Name (Last, First, Middle Initial)
Mailing Address 20872 Skimmer Ln
City Huntington Beach State CA Zip Code 92646
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 29 / 2014
Transaction ID : 4229509
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 1538 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Donald Sims
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Baywatch Circle
 City Fayetteville State GA Zip Code 30215
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4234007
 Amount of Each Receipt this Period
 25.00

B. Jacqueline Sinatra
 Full Name (Last, First, Middle Initial)
 Mailing Address 3242 NW 62nd Street
 City Seattle State WA Zip Code 98107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Highline Medical Center Occupation Director Of Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238942
 Amount of Each Receipt this Period
 25.00

C. Ms. Kim Kimasa Sindel
 Full Name (Last, First, Middle Initial)
 Mailing Address 7711 Bonhomme #815
 City St Louis State MO Zip Code 63105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self 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
 12 / 27 / 2014
Transaction ID : 4240943
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1539 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Rebecca Sisk

Mailing Address 7214 West Legion Hall Road

City State Zip Code
Dunlap IL 61614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Chamberlain College Of Nursing Associate Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **535.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2014

Transaction ID : 4231650

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Rebecca Sisk

Mailing Address 7214 West Legion Hall Road

City State Zip Code
Dunlap IL 61614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Chamberlain College Of Nursing Associate Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **535.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 10 / 2014

Transaction ID : 4234584

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Pamela Sivertsen

Mailing Address 46 Norwood Ave

City State Zip Code
Buffalo NY 14222

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Buffalo Public Schools Educator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2014

Transaction ID : 4235995

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **90.00**

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 1540 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Nathan Sivin
 Full Name (Last, First, Middle Initial)
 Mailing Address 8125 Roanoke St.
 City Philadelphia State PA Zip Code 19118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U of PA Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230793
 Amount of Each Receipt this Period
 100.00

B. Ms. Elizabeth L. Sjoberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 6817 Marbrys Ridge Cv
 City Austin State TX Zip Code 78731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4236023
 Amount of Each Receipt this Period
 30.00

C. Eric Skalwold
 Full Name (Last, First, Middle Initial)
 Mailing Address 363 E. King Rd
 City Ithaca State NY Zip Code 14850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236833
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00
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 1541 OF 2648
	<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)
EMILY's List

A. Kay Skinner
Full Name (Last, First, Middle Initial)
Mailing Address 19 Laguna Court

City Manhattan Beach	State CA	Zip Code 90266
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	18	/	2014

Transaction ID : 4238079

Amount of Each Receipt this Period
50.00

B. Kay Skinner
Full Name (Last, First, Middle Initial)
Mailing Address 19 Laguna Court

City Manhattan Beach	State CA	Zip Code 90266
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	18	/	2014

Transaction ID : 4238132

Amount of Each Receipt this Period
50.00

C. Ms. Nancy Skinner
Full Name (Last, First, Middle Initial)
Mailing Address 1724 Highland Drive

City Newport Beach	State CA	Zip Code 92660
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	15	/	2014

Transaction ID : 4236849

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 1542 OF 2648
	<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)
EMILY's List

A. Ms. Anne Skinner
Full Name (Last, First, Middle Initial)
Mailing Address Box 353

City Williamstown	State MA	Zip Code 01267
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 865.00	

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238943

Amount of Each Receipt this Period
250.00

B. Ms. Sherron Slack
Full Name (Last, First, Middle Initial)
Mailing Address 3216 Malibu Vista St

City Las Vegas	State NV	Zip Code 89117
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Date of Receipt
12 / 16 / 2014
Transaction ID : 4237206

Amount of Each Receipt this Period
15.00

C. D. Bledsoe Slaughter
Full Name (Last, First, Middle Initial)
Mailing Address 4713 6Th Pl Ne

City Washington	State DC	Zip Code 20017
FEC ID number of contributing federal political committee. C		
Name of Employer Executive	Occupation University Of Distri.Of Colomb	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Date of Receipt
11 / 28 / 2014
Transaction ID : 4229321

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 1543 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. D. Bledsoe Slaughter		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242350
Mailing Address 4713 6Th PI Ne		Amount of Each Receipt this Period 20.00
City Washington	State DC	Zip Code 20017
FEC ID number of contributing federal political committee. C		
Name of Employer Executive	Occupation University Of Distri.Of Colomb	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) B. Ms. Sabina Slavin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4229779
Mailing Address 128 West Mountain Road		Amount of Each Receipt this Period 100.00
City Ridgefield	State CT	Zip Code 06877
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Ms. Sabina Slavin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4240137
Mailing Address 128 West Mountain Road		Amount of Each Receipt this Period 100.00
City Ridgefield	State CT	Zip Code 06877
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional).....▶	220.00
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 1544 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Denise M. Slotoroff		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232703
Mailing Address Belmor Hill		Amount of Each Receipt this Period 600.00
City Linwood	State NJ	Zip Code 08221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Seashore Medical Association	Occupation Bookkeeper	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Ms. Barbara Small		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014 Transaction ID : 4236009
Mailing Address 207 Greenwood Ave		Amount of Each Receipt this Period 30.00
City Madison	State NJ	Zip Code 07940
FEC ID number of contributing federal political committee. C		
Name of Employer Small & Associates, Inc.	Occupation Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) C. Ms. Judith Smart		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230796
Mailing Address 6045 Glenaire DR		Amount of Each Receipt this Period 113.00
City Saint Louis	State MO	Zip Code 63129
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 ▼ 438.00	

SUBTOTAL of Receipts This Page (optional).....▶	193.00
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 1545 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Peter Smirniotopoulos

Mailing Address 205 Garden Ct

City Falls Church State VA Zip Code 22046

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Educator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243524

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Diana Smith

Mailing Address PO Box 6294

City Lincoln State MA Zip Code 01773

FEC ID number of contributing federal political committee. **C**

Name of Employer Coldwell Banker Occupation Real Estate Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4231218

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. Mr. Bruce Smith

Mailing Address 26139 Timberline Dr.

City San Antonio State TX Zip Code 78260

FEC ID number of contributing federal political committee. **C**

Name of Employer Esa Mech. & Electrical Engineering, In Occupation Mechanical Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230800

Amount of Each Receipt this Period
255.00

SUBTOTAL of Receipts This Page (optional).....▶	505.00
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 1546 OF 2648
	<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)
EMILY's List

A. Ms. Kristy K. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1572 Birmingham Ct.
Apt. 1W

City State Zip Code
Crystal Lake IL 60014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Forsythe Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 4229326

Amount of Each Receipt this Period
25.00

B. Ms. Kristy K. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1572 Birmingham Ct.
Apt. 1W

City State Zip Code
Crystal Lake IL 60014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Forsythe Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014

Transaction ID : 4242354

Amount of Each Receipt this Period
25.00

C. Dr. Juanita Smith
Full Name (Last, First, Middle Initial)

Mailing Address 705 River Rock Way

City State Zip Code
Newport News VA 23608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Gloucester County Public Schools Hr Director

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
12 / 10 / 2014

Transaction ID : 4234509

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 1547 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jennifer J. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 64 O. St.

City Boston State MA Zip Code 02127

FEC ID number of contributing federal political committee. **C**

Name of Employer Nokia Occupation user experience designer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4244836

Amount of Each Receipt this Period
 30.00

B. Larry Smith
Full Name (Last, First, Middle Initial)

Mailing Address 780 Brunswick Pike

City Lambertville State NJ Zip Code 08530

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014

Transaction ID : 4234185

Amount of Each Receipt this Period
 3.00

C. Larry Smith
Full Name (Last, First, Middle Initial)

Mailing Address 780 Brunswick Pike

City Lambertville State NJ Zip Code 08530

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014

Transaction ID : 4234529

Amount of Each Receipt this Period
 3.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **36.00**

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 1548 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Larry Smith
Full Name (Last, First, Middle Initial)

Mailing Address 780 Brunswick Pike

City Lambertville State NJ Zip Code 08530

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 12 / 27 / 2014
Transaction ID : 4241011

Amount of Each Receipt this Period
 3.00

B. Larry Smith
Full Name (Last, First, Middle Initial)

Mailing Address 780 Brunswick Pike

City Lambertville State NJ Zip Code 08530

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 12 / 09 / 2014
Transaction ID : 4234186

Amount of Each Receipt this Period
 5.00

C. Larry Smith
Full Name (Last, First, Middle Initial)

Mailing Address 780 Brunswick Pike

City Lambertville State NJ Zip Code 08530

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 11 / 26 / 2014
Transaction ID : 4228134

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 23.00

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 1549 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Larry Smith		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2014 Transaction ID : 4231411
Mailing Address 780 Brunswick Pike		Amount of Each Receipt this Period 15.00
City Lambertville	State NJ	Zip Code 08530
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 210.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Larry Smith		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014 Transaction ID : 4234530
Mailing Address 780 Brunswick Pike		Amount of Each Receipt this Period 15.00
City Lambertville	State NJ	Zip Code 08530
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 210.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Lois K. Smith		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236343
Mailing Address 94 Gooseberry Lane		Amount of Each Receipt this Period 15.00
City Dahlonega	State GA	Zip Code 30533
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 210.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 1550 OF 2648
	<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)
EMILY's List

A. Ms. Lois K. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 94 Gooseberry Lane

City Dahlonega State GA Zip Code 30533

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : 4237156

Amount of Each Receipt this Period
15.00

B. Larry Smith
Full Name (Last, First, Middle Initial)

Mailing Address 780 Brunswick Pike

City Lambertville State NJ Zip Code 08530

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : 4231219

Amount of Each Receipt this Period
30.00

C. Ms. Marlene Smith
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1291

City Washington State CT Zip Code 06793

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014

Transaction ID : 4233565

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **55.00**

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 1551 OF 2648
	<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)
EMILY's List

A. Ms. Suzette Smith
Full Name (Last, First, Middle Initial)

Mailing Address 3624 Kinney Circle

City Los Angeles	State CA	Zip Code 90065
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4232133

Amount of Each Receipt this Period

90.00	90.00	90.00	90.00	90.00
-------	-------	-------	-------	-------

25.00

B. Ms. Jane H. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 2609 Pinewood Terrace

City Austin	State TX	Zip Code 78757
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	18	/	2014

Transaction ID : 4238123

Amount of Each Receipt this Period

90.00	90.00	90.00	90.00	90.00
-------	-------	-------	-------	-------

50.00

C. Carol Smith
Full Name (Last, First, Middle Initial)

Mailing Address 830 Sixth Street

City Gilroy	State CA	Zip Code 95020
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	17	/	2014

Transaction ID : 4237841

Amount of Each Receipt this Period

90.00	90.00	90.00	90.00	90.00
-------	-------	-------	-------	-------

15.00

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 1552 OF 2648
	<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)
EMILY's List

A. Carol Smith
Full Name (Last, First, Middle Initial)
Mailing Address 830 Sixth Street
City Gilroy State CA Zip Code 95020
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.00

Date of Receipt
12 / 27 / 2014
Transaction ID : 4240996
Amount of Each Receipt this Period
15.00

B. Carol Smith
Full Name (Last, First, Middle Initial)
Mailing Address 830 Sixth Street
City Gilroy State CA Zip Code 95020
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4240105
Amount of Each Receipt this Period
20.00

C. Dr. Patricia J. Smith
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 2049
City Ocean Shores State WA Zip Code 98569
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
12 / 31 / 2014
Transaction ID : 4243473
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 1553 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Paul R. Smith

Mailing Address 790 Pugh Road

City Wayne State PA Zip Code 19087

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 ▼ **215.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236780

Amount of Each Receipt this Period
 15.00

Full Name (Last, First, Middle Initial)
B. Ms. Irene Smith

Mailing Address 27 Crook Horn Rd

City Southbury State CT Zip Code 06488

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 ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234228

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Ms. Jeanne S. Smith

Mailing Address 541 Austin Street

City Greensburg State PA Zip Code 15601

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 ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234501

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **50.00**

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 1554 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ira Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 2030 Kettle Ct.
 City State Zip Code
 Lansing IL 60438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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 / 27 / 2014
Transaction ID : 4228363
 Amount of Each Receipt this Period
 250.00

B. Ms. Sandra Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Utah Ave
 City State Zip Code
 Long Beach Township NJ 08008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 01 / 2014
Transaction ID : 4230798
 Amount of Each Receipt this Period
 50.00

C. Ms. Patricia Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 1712 Limpus Ln.
 City State Zip Code
 Forest Grove OR 97116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237749
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 1556 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Alice W. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 61 Freeman Ridge Road
 City Southwest Harbor State ME Zip Code 04679
 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 ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4230206
 Amount of Each Receipt this Period
 25.00

B. Ms. Alice W. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 61 Freeman Ridge Road
 City Southwest Harbor State ME Zip Code 04679
 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 ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4244923
 Amount of Each Receipt this Period
 25.00

C. Mr. James Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 12018 Navy St.
 City Los Angeles State CA Zip Code 90066
 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 ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237118
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 1557 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ann C. Smith		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2014
Mailing Address 941 NW 30th Ave Apt D		Transaction ID : 4235585
City Delray Beach	State FL	Zip Code 33445
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
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 ▼ 917.00	

Full Name (Last, First, Middle Initial) B. Ms. Ann C. Smith		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2014
Mailing Address 941 NW 30th Ave Apt D		Transaction ID : 4242754
City Delray Beach	State FL	Zip Code 33445
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
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 ▼ 917.00	

Full Name (Last, First, Middle Initial) C. Theodore Smith		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014
Mailing Address 14 Laurel Dr		Transaction ID : 4232122
City Delmar	State NY	Zip Code 12054
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 1558 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Doris Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 27010 Grand Central Pkwy Apt 24w
 City State Zip Code
 Floral Park NY 11005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 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
 12 / 08 / 2014
Transaction ID : 4233045
 Amount of Each Receipt this Period
 100.00

B. Miss Barbara Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 487 Coventry Ave
 City State Zip Code
 Utica NY 13502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236344
 Amount of Each Receipt this Period
 35.00

C. Ms. Amanda J. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 103 W Main St
 City State Zip Code
 Durham NC 27701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : 4239462
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1135.00
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 1559 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Dorothy Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 5007 Saffron Court
 City Fort Collins State CO Zip Code 80525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rocky Mountain Youth Sports (Rmys) Occupation Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4244837
 Amount of Each Receipt this Period
 17.00

B. Ms. Dorothy Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 5007 Saffron Court
 City Fort Collins State CO Zip Code 80525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rocky Mountain Youth Sports (Rmys) Occupation Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228133
 Amount of Each Receipt this Period
 25.00

C. Ms. Dorothy Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 5007 Saffron Court
 City Fort Collins State CO Zip Code 80525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rocky Mountain Youth Sports (Rmys) Occupation Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240710
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 67.00
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 1560 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Polly P Smith		Date of Receipt
Mailing Address 307 E 12th St Apt 2a		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
New York	NY	10003
FEC ID number of contributing federal political committee.		Transaction ID : 4232601
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="425.00"/>
Name of Employer	Occupation	
Unemployed	Costume Designer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="425.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Polly P Smith		Date of Receipt
Mailing Address 307 E 12th St Apt 2a		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
New York	NY	10003
FEC ID number of contributing federal political committee.		Transaction ID : 4242952
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Unemployed	Costume Designer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="425.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Polly P Smith		Date of Receipt
Mailing Address 307 E 12th St Apt 2a		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
New York	NY	10003
FEC ID number of contributing federal political committee.		Transaction ID : 4242953
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Unemployed	Costume Designer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="425.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="125.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1561 OF 2648
	<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)
EMILY's List

A. Ms. Sherri Smith
Full Name (Last, First, Middle Initial)
Mailing Address 1733 Jackson Ave
City Ann Arbor State MI Zip Code 48103
FEC ID number of contributing federal political committee. **C**
Name of Employer University Of Mich Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 01 / 2014
Transaction ID : 4230799
Amount of Each Receipt this Period 125.00

B. Page H. Smith
Full Name (Last, First, Middle Initial)
Mailing Address 216 Beringer Pl
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 19 / 2014
Transaction ID : 4238949
Amount of Each Receipt this Period 15.00

C. Rides Smith
Full Name (Last, First, Middle Initial)
Mailing Address 10901 Long Shadow Ln.
City Houston State TX Zip Code 77024
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 23 / 2014
Transaction ID : 4240140
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
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 1562 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Tara Smith
Full Name (Last, First, Middle Initial)

Mailing Address 237 N Monroe St

City State Zip Code
Ridgewood NJ 07450

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

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 / 27 / 2014

Transaction ID : 4228339

Amount of Each Receipt this Period
25.00

B. Tara Smith
Full Name (Last, First, Middle Initial)

Mailing Address 237 N Monroe St

City State Zip Code
Ridgewood NJ 07450

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

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
 12 / 27 / 2014

Transaction ID : 4241177

Amount of Each Receipt this Period
25.00

C. Ms. Cornelia Smollin
Full Name (Last, First, Middle Initial)

Mailing Address 110 McIntyre Rd. Rm. 366w

City State Zip Code
Pittsburgh PA 15237

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237486

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

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 1563 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Kenneth L. Smullen
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 Lamell Ave.
 City Essex Junction State VT Zip Code 05452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227471
 Amount of Each Receipt this Period
 30.00

B. Ms. Barbara Smyth
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Homestead Avenue
 City New Britain State CT Zip Code 06053
 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 ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231655
 Amount of Each Receipt this Period
 20.00

C. Ms. Frances H. Snedeker
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Linden Ave
 City Larchmont State NY Zip Code 10538
 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 ▼
 418.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231771
 Amount of Each Receipt this Period
 22.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 72.00
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 1564 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ellen Snee		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243324
Mailing Address 2140 Sant Cruz Ave C203		Amount of Each Receipt this Period 250.00
City Menlo Park	State CA	
Zip Code 94025		Aggregate Year-to-Date ▼ 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. John Snell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229327
Mailing Address 558 Echo Valley Road		Amount of Each Receipt this Period 50.00
City Brooklyn	State WI	
Zip Code 53521		Aggregate Year-to-Date ▼ 1150.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Registered Nurse	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. John Snell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229328
Mailing Address 558 Echo Valley Road		Amount of Each Receipt this Period 50.00
City Brooklyn	State WI	
Zip Code 53521		Aggregate Year-to-Date ▼ 1150.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Registered Nurse	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	350.00
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 1565 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. John Snell
 Full Name (Last, First, Middle Initial)
 Mailing Address 558 Echo Valley Road
 City State Zip Code
 Brooklyn WI 53521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Registered Nurse
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241677
 Amount of Each Receipt this Period
 50.00

B. John Snell
 Full Name (Last, First, Middle Initial)
 Mailing Address 558 Echo Valley Road
 City State Zip Code
 Brooklyn WI 53521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Registered Nurse
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242355
 Amount of Each Receipt this Period
 50.00

C. Ms. Nancy Snook
 Full Name (Last, First, Middle Initial)
 Mailing Address 346 N Franklin St.
 City State Zip Code
 Delaware OH 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 02 / 2014
Transaction ID : 4231221
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 1566 OF 2648
	<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)
EMILY's List

A. Lillian Snyder
Full Name (Last, First, Middle Initial)

Mailing Address 161 Tierra Encantada

City Corrales State NM Zip Code 87048

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

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 / 28 / 2014
Transaction ID : 4229329

Amount of Each Receipt this Period
 20.00

B. Lillian Snyder
Full Name (Last, First, Middle Initial)

Mailing Address 161 Tierra Encantada

City Corrales State NM Zip Code 87048

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

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
 12 / 28 / 2014
Transaction ID : 4241564

Amount of Each Receipt this Period
 20.00

C. Ms. Nancy Snyder
Full Name (Last, First, Middle Initial)

Mailing Address 235 13th Ave. E, Apt. 201

City Seattle State WA Zip Code 98102

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 ▼ 384.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240141

Amount of Each Receipt this Period
 32.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 72.00

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 1567 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Jill Donnie Snyder		Date of Receipt 12 / 01 / 2014 Transaction ID : 4230802
Mailing Address 12222 Forsythe Dr		Amount of Each Receipt this Period 100.00
City Austin	State TX	Zip Code 78759
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Education	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1058.00	

Full Name (Last, First, Middle Initial) B. Ms. Jill A. Soffer		Date of Receipt 12 / 05 / 2014 Transaction ID : 4232810
Mailing Address 426 East Rustic Road		Amount of Each Receipt this Period 250.00
City Santa Monica	State CA	Zip Code 90402
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Interior Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3100.00	

Full Name (Last, First, Middle Initial) C. Ms. Hilda W. Sokol		Date of Receipt 12 / 12 / 2014 Transaction ID : 4235832
Mailing Address 80 Lyme Road #1922		Amount of Each Receipt this Period 50.00
City Hanover	State NH	Zip Code 03755
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 685.00	

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 1568 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Martha S. Solano
 Full Name (Last, First, Middle Initial)
 Mailing Address 3750 Peachtree Rd NE
 Apt 475
 City Atlanta State GA Zip Code 30319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240142
 Amount of Each Receipt this Period
 100.00

B. Ms. Janet Solecki
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Fairwood Ln
 City Saint Louis State MO Zip Code 63122
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230803
 Amount of Each Receipt this Period
 40.00

C. Ms. Linnea Solem
 Full Name (Last, First, Middle Initial)
 Mailing Address 2281 Hillwood Dr. E
 City Saint Paul State MN Zip Code 55119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Deluxe Corporation Occupation Data Privacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230804
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	340.00
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 1569 OF 2648
	<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)
EMILY's List

A. Susan Solick
Full Name (Last, First, Middle Initial)

Mailing Address 5076 Sherman Dr

City Berthoud State CO Zip Code 80513

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 ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : 4243532

Amount of Each Receipt this Period
50.00

B. Mrs. Joyce Soliman
Full Name (Last, First, Middle Initial)

Mailing Address 415 W. Prospect St.

City Lake Mills State WI Zip Code 53551

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 ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014

Transaction ID : 4233289

Amount of Each Receipt this Period
75.00

C. Ms. Martha E. Solinger
Full Name (Last, First, Middle Initial)

Mailing Address 915 Wynnewood Rd E3

City Pelham State NY Zip Code 10803

FEC ID number of contributing federal political committee. **C**

Name of Employer Lehmanbrothers Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014

Transaction ID : 4228136

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 1570 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet W. Solinger		Date of Receipt
Mailing Address 2801 New Mexico Avenue, NW Apt. 707		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City Washington State DC Zip Code 20007		Transaction ID : 4231223
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 None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="3050.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Sharon M. Solomon		Date of Receipt
Mailing Address 404 Durant Way		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City Mill Valley State CA Zip Code 94941		Transaction ID : 4238349
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 None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) C. Arleen Somerville		Date of Receipt
Mailing Address 18 Melody Ln.		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City Geneseo State NY Zip Code 14454		Transaction ID : 4236541
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="800.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1571 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Karen Sonderby		Date of Receipt
Mailing Address 88 W. Schiller St.		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chicago	IL	60610
FEC ID number of contributing federal political committee.		Transaction ID : 4233775
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Margaret Sondler		Date of Receipt
Mailing Address 2147 W. Farwell Ave.		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chicago	IL	60645
FEC ID number of contributing federal political committee.		Transaction ID : 4239289
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="390.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Margaret Sondler		Date of Receipt
Mailing Address 2147 W. Farwell Ave.		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chicago	IL	60645
FEC ID number of contributing federal political committee.		Transaction ID : 4239290
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="390.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="350.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1572 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Janet Sorensen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241565
Mailing Address 341 Dewey Ave		Amount of Each Receipt this Period 50.00
City Evanston	State IL	
Zip Code 60202		Aggregate Year-to-Date ▼ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ms. Kathryn Sorenson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237380
Mailing Address 13200 SW 69th Avenue		Amount of Each Receipt this Period 250.00
City Miami	State FL	
Zip Code 33156		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Ms. Faye Sortor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4231763
Mailing Address 3005 Johnson Circle		Amount of Each Receipt this Period 25.00
City Bridgewater	State NJ	
Zip Code 08807		Aggregate Year-to-Date ▼ 250.00
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 ▼ 250.00		

SUBTOTAL of Receipts This Page (optional).....▶	325.00
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 1573 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Rita M. Sovo
 Full Name (Last, First, Middle Initial)
 Mailing Address 2795 U.S. Highway 52
 City State Zip Code
 Minooka IL 60447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 363.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234324
 Amount of Each Receipt this Period
 218.00

B. Ms. Elizabeth Spahn
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Appleton St Apt 1h
 City State Zip Code
 Boston MA 02116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Professor Of Law New England Law | Boston
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4244887
 Amount of Each Receipt this Period
 50.00

C. Ms. Joann E. Spall
 Full Name (Last, First, Middle Initial)
 Mailing Address 9613 Gladstone St.
 City State Zip Code
 Manassas VA 20110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 286.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : 4238328
 Amount of Each Receipt this Period
 80.00

SUBTOTAL of Receipts This Page (optional).....▶	348.00
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 1574 OF 2648
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Jeannine Spann
Full Name (Last, First, Middle Initial)

Mailing Address 1021 Castlemaine Trail
Birmingham

City Birmingham State AL Zip Code 35226

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4239582

Amount of Each Receipt this Period
100.00

B. Ben Sparks
Full Name (Last, First, Middle Initial)

Mailing Address 122 Hawk Pine Road

City Norwich State VT Zip Code 05055

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238958

Amount of Each Receipt this Period
50.00

C. Mr. Jim Speakman
Full Name (Last, First, Middle Initial)

Mailing Address 1025 43rd Street

City Sacramento State CA Zip Code 95819

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 ▼
360.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4233986

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00

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 1575 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Ms. Joan B. Spear
 Full Name (Last, First, Middle Initial)
 Mailing Address 87 Cathole Road
 City Bantam State CT Zip Code 06750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 428.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240143
 Amount of Each Receipt this Period
 15.00

B. Ms. Ilene Spear
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Turnberry Drive
 City Newport Beach State CA Zip Code 92660
 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 ▼ 578.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241049
 Amount of Each Receipt this Period
 25.00

C. Mrs. Phyllis Specht
 Full Name (Last, First, Middle Initial)
 Mailing Address 2956 E. Del Mar Blvd., Apt. 244
 City Pasadena State CA Zip Code 91107
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230807
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 1576 OF 2648
	<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)
EMILY's List

A. Mr. William Speck
Full Name (Last, First, Middle Initial)
Mailing Address 25 Sutton Place
City New York State NY Zip Code 10022
FEC ID number of contributing federal political committee. **C**
Name of Employer Columbia University Occupation Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **700.00**

Date of Receipt **12 / 15 / 2014**
Transaction ID : 4236879
Amount of Each Receipt this Period **100.00**

B. Mrs. William K. Speer
Full Name (Last, First, Middle Initial)
Mailing Address 276 Riverside Drive 8h
City New York State NY Zip Code 10025
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **650.00**

Date of Receipt **11 / 28 / 2014**
Transaction ID : 4229333
Amount of Each Receipt this Period **50.00**

C. Mrs. William K. Speer
Full Name (Last, First, Middle Initial)
Mailing Address 276 Riverside Drive 8h
City New York State NY Zip Code 10025
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **650.00**

Date of Receipt **12 / 19 / 2014**
Transaction ID : 4238959
Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... **200.00**
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 1577 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. William K. Speer
 Full Name (Last, First, Middle Initial)
 Mailing Address 276 Riverside Drive
 8h
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241566
 Amount of Each Receipt this Period
 50.00

B. Sandra E. Speicher
 Full Name (Last, First, Middle Initial)
 Mailing Address 5888 County Road 7
 City Weston State CO Zip Code 81091
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235458
 Amount of Each Receipt this Period
 25.00

C. Ms. Barbara Speidel
 Full Name (Last, First, Middle Initial)
 Mailing Address 8145 Binney Pl
 City La Mesa State CA Zip Code 91942
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228138
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 1578 OF 2648
	<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)
EMILY's List

A. Ms. Barbara Speidel
Full Name (Last, First, Middle Initial)

Mailing Address 8145 Binney Pl

City La Mesa State CA Zip Code 91942

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 ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014

Transaction ID : 4240802

Amount of Each Receipt this Period
200.00

B. Jeanne Speir
Full Name (Last, First, Middle Initial)

Mailing Address 256 Main St

City Westhampton Beach State NY Zip Code 11978

FEC ID number of contributing federal political committee. **C**

Name of Employer First Choice Medical Occupation Nurse Practitioner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4236643

Amount of Each Receipt this Period
10.00

C. Ms. Mary Alice Spencer
Full Name (Last, First, Middle Initial)

Mailing Address 1001 Senora Ave.

City Billings State MT Zip Code 59105

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 ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014

Transaction ID : 4232952

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **80.00**

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 1579 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Myra Spencer-Easton			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 7315 Golden Iris Ct			Transaction ID : 4229334
City Springfield	State VA	Zip Code 22153	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Interior Design		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 705.00		

Full Name (Last, First, Middle Initial) B. Ms. Myra Spencer-Easton			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
Mailing Address 7315 Golden Iris Ct			Transaction ID : 4241345
City Springfield	State VA	Zip Code 22153	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Interior Design		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 705.00		

Full Name (Last, First, Middle Initial) C. Ms. Myra Spencer-Easton			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014
Mailing Address 7315 Golden Iris Ct			Transaction ID : 4237782
City Springfield	State VA	Zip Code 22153	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Interior Design		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 705.00		

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 1580 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Richard Sperber		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243526
Mailing Address 408 St Anns Avenue		Amount of Each Receipt this Period 30.00
City Douglas	State AK	Zip Code 99824
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 590.00	

Full Name (Last, First, Middle Initial) B. Dr. Harriette LaVerre Spiegel		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2014 Transaction ID : 4240146
Mailing Address 302 S. McCombs St.		Amount of Each Receipt this Period 5.00
City Martin	State TN	Zip Code 38237
FEC ID number of contributing federal political committee. C		
Name of Employer University Of Tn Martin	Occupation Instructional Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

Full Name (Last, First, Middle Initial) C. Ms. Jocelyn Spielman		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2014 Transaction ID : 4244838
Mailing Address 1104 N. Quincy Street Unit F		Amount of Each Receipt this Period 20.00
City Arlington	State VA	Zip Code 22201
FEC ID number of contributing federal political committee. C		
Name of Employer The Codmus Group	Occupation Environmental Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 1581 OF 2648
	<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)
EMILY's List

A. Ms. Susann Spilkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 788 Hazelwood St
 City Birmingham State MI Zip Code 48009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Yoga Instrutor
 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
 12 / 01 / 2014
Transaction ID : 4231226
 Amount of Each Receipt this Period
 100.00

B. Stephanie Spingarn
 Full Name (Last, First, Middle Initial)
 Mailing Address 3406 Norway Place
 City Norfolk State VA Zip Code 23509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pathology Sciences Medical Group Occupation Pathologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : 4232182
 Amount of Each Receipt this Period
 100.00

C. Dr. Judith Sprei
 Full Name (Last, First, Middle Initial)
 Mailing Address 9401 Copenhaver Dr.
 City Potomac State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237450
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 1582 OF 2648
	<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)
EMILY's List

A. Ms. Carolyn M. Sprich
Full Name (Last, First, Middle Initial)

Mailing Address 165 Collins Rd

City Waban State MA Zip Code 02468

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 ▼ **600.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2014

Transaction ID : 4236347

Amount of Each Receipt this Period
50.00

B. Ms. Elaine Springer
Full Name (Last, First, Middle Initial)

Mailing Address 2524 E Lynn St

City Seattle State WA Zip Code 98112

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 4229336

Amount of Each Receipt this Period
5.00

C. Ms. Elaine Springer
Full Name (Last, First, Middle Initial)

Mailing Address 2524 E Lynn St

City Seattle State WA Zip Code 98112

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014

Transaction ID : 4242359

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **60.00**

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 1583 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Robert St.Germain
 Full Name (Last, First, Middle Initial)
 Mailing Address 64 Winter St
 City Ashland State MA Zip Code 01721
 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 ▼ 240.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236711
 Amount of Each Receipt this Period
 200.00

B. Ms. Eve M. Stacey
 Full Name (Last, First, Middle Initial)
 Mailing Address 2409 Monroe St.
 City Columbia State SC Zip Code 29205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4232990
 Amount of Each Receipt this Period
 100.00

C. Ms. Eve M. Stacey
 Full Name (Last, First, Middle Initial)
 Mailing Address 2409 Monroe St.
 City Columbia State SC Zip Code 29205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 12 / 31 / 2014
Transaction ID : 4243187
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
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 1584 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Rachel Stack		Date of Receipt
Mailing Address 1679 11th Ave		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City State Zip Code Brooklyn NY 11218		Transaction ID : 4238964
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer Scholastic, Inc.	Occupation Publishing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Beth Stafford		Date of Receipt
Mailing Address 3813 Farhills Drive		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City State Zip Code Champaign IL 61822		Transaction ID : 4234063
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="15.00"/>
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2335.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Beth Stafford		Date of Receipt
Mailing Address 3813 Farhills Drive		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City State Zip Code Champaign IL 61822		Transaction ID : 4238965
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2335.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="65.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1585 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Beth Stafford			Date of Receipt
Mailing Address 3813 Farhills Drive			<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4240147
Champaign	IL	61822	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
None	None		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2335.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Beth Stafford			Date of Receipt
Mailing Address 3813 Farhills Drive			<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4241567
Champaign	IL	61822	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
None	None		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2335.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Sarah J. Stahl			Date of Receipt
Mailing Address 1735 W Diversey Pkwy Apt 420			<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4242513
Chicago	IL	60614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="150.00"/>
Name of Employer	Occupation		
Knoll	DESIGNER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1586 OF 2648
	<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)
EMILY's List

A. Ms. Jonnie Stahl
Full Name (Last, First, Middle Initial)
Mailing Address 601 Laurel Ave
City San Mateo State CA Zip Code 94401
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 **750.00**

Date of Receipt **12 / 19 / 2014**
Transaction ID : 4238969
Amount of Each Receipt this Period **250.00**

B. Ms. Carolyn Staight
Full Name (Last, First, Middle Initial)
Mailing Address 282 Beachview Ave. Apt. 29
City Pacifica State CA Zip Code 94044
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **450.00**

Date of Receipt **12 / 31 / 2014**
Transaction ID : 4243111
Amount of Each Receipt this Period **150.00**

C. Debra Stakes
Full Name (Last, First, Middle Initial)
Mailing Address 1643 Carla Ct
City San Luis Obispo State CA Zip Code 93401
FEC ID number of contributing federal political committee. **C**
Name of Employer Cuesta College Occupation Instructor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **338.00**

Date of Receipt **12 / 03 / 2014**
Transaction ID : 4231709
Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **425.00**
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 1587 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jacqueline Staley
 Full Name (Last, First, Middle Initial)
 Mailing Address 5410 Dillweed Ct
 City North Las Vegas State NV Zip Code 89031
 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 ▼ 756.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229338
 Amount of Each Receipt this Period
 25.00

B. Jacqueline Staley
 Full Name (Last, First, Middle Initial)
 Mailing Address 5410 Dillweed Ct
 City North Las Vegas State NV Zip Code 89031
 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 ▼ 756.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241755
 Amount of Each Receipt this Period
 25.00

C. Jacqueline Staley
 Full Name (Last, First, Middle Initial)
 Mailing Address 5410 Dillweed Ct
 City North Las Vegas State NV Zip Code 89031
 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 ▼ 756.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239187
 Amount of Each Receipt this Period
 38.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 88.00
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 1588 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Betty Jean Stallings		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4228429	
Mailing Address 651 sinex Ave #L-116		Amount of Each Receipt this Period _____ 15.00	
City Pacific Grove State CA Zip Code 93950	FEC ID number of contributing federal political committee. C		
Name of Employer None Occupation None	Aggregate Year-to-Date ▼ _____ 765.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Betty Jean Stallings		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236576	
Mailing Address 651 sinex Ave #L-116		Amount of Each Receipt this Period _____ 250.00	
City Pacific Grove State CA Zip Code 93950	FEC ID number of contributing federal political committee. C		
Name of Employer None Occupation None	Aggregate Year-to-Date ▼ _____ 765.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Barbara Stanbridge		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241272	
Mailing Address 8531 W. McNichols		Amount of Each Receipt this Period _____ 100.00	
City Detroit State MI Zip Code 48221	FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Consultant	Aggregate Year-to-Date ▼ _____ 1100.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	_____ 365.00
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 1589 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rebecca Stanfield		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 5626 Parade Ridge Dr.		Transaction ID : 4229339
City Austin State TX Zip Code 78731	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 250.00	
Name of Employer None Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ms. Rebecca Stanfield		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
Mailing Address 5626 Parade Ridge Dr.		Transaction ID : 4242361
City Austin State TX Zip Code 78731	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 250.00	
Name of Employer None Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ms. Jean C. Stanfield		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014
Mailing Address 29 Ledge Ln		Transaction ID : 4227391
City Pipersville State PA Zip Code 18947	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 1300.00	
Name of Employer Requested Occupation Housewife	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Receipts This Page (optional).....▶	340.00
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 1590 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Robin Stanley		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240881
Mailing Address 15 Shire Ct		Amount of Each Receipt this Period 50.00
City Bloomington	State IL	Zip Code 61701
FEC ID number of contributing federal political committee. C		
Name of Employer State Farm	Occupation Business Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) B. Robin Stanley		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243496
Mailing Address 15 Shire Ct		Amount of Each Receipt this Period 75.00
City Bloomington	State IL	Zip Code 61701
FEC ID number of contributing federal political committee. C		
Name of Employer State Farm	Occupation Business Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. Sherry Stansbury		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2014 Transaction ID : 4239297
Mailing Address 1450 W. Glenlake		Amount of Each Receipt this Period 50.00
City Chicago	State IL	Zip Code 60660
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 1591 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Marcia Staples		Date of Receipt M M / D D / Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230161
Mailing Address 5245 Winding Way		Amount of Each Receipt this Period 35.00
City Sarasota	State FL	Zip Code 34242
FEC ID number of contributing federal political committee. C		
Name of Employer Planned Parenthood & Innovative Senior	Occupation Rn & Otr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) B. Marcia Staples		Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240813
Mailing Address 5245 Winding Way		Amount of Each Receipt this Period 35.00
City Sarasota	State FL	Zip Code 34242
FEC ID number of contributing federal political committee. C		
Name of Employer Planned Parenthood & Innovative Senior	Occupation Rn & Otr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. Deborah Starbuck-Franklin		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234242
Mailing Address 4140 Fair Oaks Blvd		Amount of Each Receipt this Period 250.00
City Sacramento	State CA	Zip Code 95864
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 ▼ 325.00	

SUBTOTAL of Receipts This Page (optional).....▶	320.00
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 1592 OF 2648
	<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)
EMILY's List

A. Lois Starcher
Full Name (Last, First, Middle Initial)
Mailing Address 4311 Ida Drive
City New Franklin State OH Zip Code 44319
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 ▼ 550.00

Date of Receipt 12 / 05 / 2014
Transaction ID : 4232834
Amount of Each Receipt this Period 25.00

B. Lois Starcher
Full Name (Last, First, Middle Initial)
Mailing Address 4311 Ida Drive
City New Franklin State OH Zip Code 44319
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 ▼ 550.00

Date of Receipt 12 / 23 / 2014
Transaction ID : 4240148
Amount of Each Receipt this Period 25.00

C. Ms. Ruth Starks
Full Name (Last, First, Middle Initial)
Mailing Address 9216 Annapolis Lane N.
City Maple Grove State MN Zip Code 55369
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4230046
Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 1593 OF 2648
	(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)
EMILY's List

A. Ms. Ruth Starks
Full Name (Last, First, Middle Initial)

Mailing Address 9216 Annapolis Lane N.

City State Zip Code
Maple Grove MN 55369

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4240149

Amount of Each Receipt this Period
15.00

B. Ms. Susan F. Starr
Full Name (Last, First, Middle Initial)

Mailing Address 169 Greenwood Avenue
Apt. G5

City State Zip Code
Jenkintown PA 19046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Csd Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.36

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2014
Transaction ID : 4236348

Amount of Each Receipt this Period
20.00

C. Ms. Dorothy W. Starr
Full Name (Last, First, Middle Initial)

Mailing Address 1701 Campus Dr Unit 1422

City State Zip Code
Clive IA 50325

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
381.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014
Transaction ID : 4227618

Amount of Each Receipt this Period
113.00

SUBTOTAL of Receipts This Page (optional).....▶	148.00
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 1594 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Stephanie D. Starrett
 Full Name (Last, First, Middle Initial)
 Mailing Address 10801 Cogswell Place
 City State Zip Code
 Fairfax Station VA 22039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236350
 Amount of Each Receipt this Period
 30.00

B. Mrs. Mildred J. Starrett
 Full Name (Last, First, Middle Initial)
 Mailing Address 1660 W. Glendale Ave., Apt. 1216
 City State Zip Code
 Phoenix AZ 85021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 444.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240607
 Amount of Each Receipt this Period
 10.00

C. Ms. Nancy Staszak
 Full Name (Last, First, Middle Initial)
 Mailing Address 7812 Westview Ln
 City State Zip Code
 Woodridge IL 60517
 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 ▼
 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235667
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 1595 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margaret A. Staton
 Full Name (Last, First, Middle Initial)
 Mailing Address 1639 Fernald Point Lane
 City Santa Barbara State CA Zip Code 93108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228373
 Amount of Each Receipt this Period
 25.00

B. Ms. Margaret A. Staton
 Full Name (Last, First, Middle Initial)
 Mailing Address 1639 Fernald Point Lane
 City Santa Barbara State CA Zip Code 93108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241040
 Amount of Each Receipt this Period
 25.00

C. Ms. Margaret A. Staton
 Full Name (Last, First, Middle Initial)
 Mailing Address 1639 Fernald Point Lane
 City Santa Barbara State CA Zip Code 93108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238971
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 1596 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Steven Staudaher

Mailing Address 10 Loring Way

City Sterling State MA Zip Code 01564

FEC ID number of contributing federal political committee. **C**

Name of Employer Cognex Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227644

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. Christina Stauffer

Mailing Address PO Box 683

City Seward State AK Zip Code 99664

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242593

Amount of Each Receipt this Period
 75.00

Full Name (Last, First, Middle Initial)
C. Mr. Josef Stauffer

Mailing Address 100 E Meadow Dr Ste 31

City Vail State CO Zip Code 81657

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234377

Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

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 1597 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Valerie A. StCyr		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014
Mailing Address 4 Nathan Pratt Dr Unit 106		Transaction ID : 4237990
City Concord	State MA	Zip Code 01742
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer Teradyne	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Douglas Stearns		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014
Mailing Address PO Box 357		Transaction ID : 4230176
City Athens	State PA	Zip Code 18810
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
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 ▼ 650.00	

Full Name (Last, First, Middle Initial) C. Douglas Stearns		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014
Mailing Address PO Box 357		Transaction ID : 4240842
City Athens	State PA	Zip Code 18810
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
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 ▼ 650.00	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 1598 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Julie Steckel		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237926
Mailing Address 1126 Bel Air Drive		Amount of Each Receipt this Period 15.00
City Santa Barbara	State CA	Zip Code 93105
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 745.00	

Full Name (Last, First, Middle Initial) B. Mrs. Julie Steckel		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236141
Mailing Address 1126 Bel Air Drive		Amount of Each Receipt this Period 35.00
City Santa Barbara	State CA	Zip Code 93105
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 745.00	

Full Name (Last, First, Middle Initial) C. Mrs. Julie Steckel		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2014 Transaction ID : 4229623
Mailing Address 1126 Bel Air Drive		Amount of Each Receipt this Period 50.00
City Santa Barbara	State CA	Zip Code 93105
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 745.00	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 1599 OF 2648
	<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)
EMILY's List

A. Mrs. Julie Steckel
Full Name (Last, First, Middle Initial)
Mailing Address 1126 Bel Air Drive

City Santa Barbara	State CA	Zip Code 93105
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
745.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	13	/	2014

Transaction ID : 4236142

Amount of Each Receipt this Period
50.00

B. Mrs. Julie Steckel
Full Name (Last, First, Middle Initial)
Mailing Address 1126 Bel Air Drive

City Santa Barbara	State CA	Zip Code 93105
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
745.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241569

Amount of Each Receipt this Period
50.00

C. Danae Steele
Full Name (Last, First, Middle Initial)
Mailing Address 428 9th St.

City Neenah	State WI	Zip Code 54956
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Fox Valley Perinatology	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4229791

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 1600 OF 2648
	<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)
EMILY's List

A. Jean Steele
Full Name (Last, First, Middle Initial)
Mailing Address 13250 Philadelphia St Apt 307

City Whittier	State CA	Zip Code 90601
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

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
12	/	16	/	2014

Transaction ID : 4237184

Amount of Each Receipt this Period
100.00

B. Sue P. Steele
Full Name (Last, First, Middle Initial)
Mailing Address 425 Throckmorton Ave

City Mill Valley	State CA	Zip Code 94941
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Counselor
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	27	/	2014

Transaction ID : 4240951

Amount of Each Receipt this Period
25.00

C. Mr. Charles Steele
Full Name (Last, First, Middle Initial)
Mailing Address 809 Tolman Drive

City Stanford	State CA	Zip Code 94305
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Stanford University	Occupation Professor
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4229341

Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional).....▶	235.00
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 1601 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Charles Steele		Date of Receipt
Mailing Address 809 Tolman Drive		M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
City	State	Zip Code
Stanford	CA	94305
FEC ID number of contributing federal political committee. C		Transaction ID : 4242362
Name of Employer Stanford University		Amount of Each Receipt this Period
Occupation Professor		110.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	1320.00	

Full Name (Last, First, Middle Initial) B. Ms. Sarah Stefano		Date of Receipt
Mailing Address 8005 Woods Lane		M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2014
City	State	Zip Code
Columbus	OH	43235
FEC ID number of contributing federal political committee. C		Transaction ID : 4242457
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	250.00	

Full Name (Last, First, Middle Initial) C. Stephen Stehman		Date of Receipt
Mailing Address 1368 Westmoreland Ave.		M M M / D D D / Y Y Y Y Y Y 12 / 04 / 2014
City	State	Zip Code
Syracuse	NY	13210
FEC ID number of contributing federal political committee. C		Transaction ID : 4232256
Name of Employer State University Of New York		Amount of Each Receipt this Period
Occupation Professor		125.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	525.00	

SUBTOTAL of Receipts This Page (optional).....▶	485.00
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 1602 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. James Stehn		Date of Receipt
Mailing Address 709 5th Street		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hoquiam	WA	98550
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4231865
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) B. Joann Stehr		Date of Receipt
Mailing Address 541 Lake Murex Circle		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Sanibel	FL	33957
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4227693
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Pamela A. Steiger		Date of Receipt
Mailing Address 2648 Oriole Dr.		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
Sierra Vista	AZ	85635
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4242512
Name of Employer	Occupation	Amount of Each Receipt this Period
Requested	Requested	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="253.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="220.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1603 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Meryl Steigman

Mailing Address 7701 Granada Dr.

City State Zip Code
Bethesda MD 20817

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

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 / 25 / 2014
Transaction ID : 4227451

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
B. Mr. Howard Stein

Mailing Address 5000 S. East End Ave.

City State Zip Code
Chicago IL 60615

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235416

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Amy Stein

Mailing Address 9026 Castle Harbour Cir

City State Zip Code
Vero Beach FL 32963

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

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
 12 / 08 / 2014
Transaction ID : 4233831

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 310.00

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 1604 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Beatrice F. Stein
 Full Name (Last, First, Middle Initial)
 Mailing Address 478 2nd St
 City Brooklyn State NY Zip Code 11215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239324
 Amount of Each Receipt this Period
 15.00

B. Ms. Pearl Steinberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 3300 Darby Road, Apt #1205
 City Haverford State PA Zip Code 19041
 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 ▼ 339.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232536
 Amount of Each Receipt this Period
 22.00

C. Ms. Laura Steinman
 Full Name (Last, First, Middle Initial)
 Mailing Address 311 Ramona Ave
 City Piedmont State CA Zip Code 94611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Editor/Writer/Educator
 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
 12 / 14 / 2014
Transaction ID : 4235682
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional).....▶	337.00
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 1605 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. William Steinmayer

Mailing Address 37 Hewitt Road

City Mystic	State CT	Zip Code 06355
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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 ▼
440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232928

Amount of Each Receipt this Period
 10.00

Full Name (Last, First, Middle Initial)
B. William Steinmayer

Mailing Address 37 Hewitt Road

City Mystic	State CT	Zip Code 06355
----------------	-------------	-------------------

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 ▼
440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : 4234293

Amount of Each Receipt this Period
 10.00

Full Name (Last, First, Middle Initial)
C. Ms. Joan A. Steitz

Mailing Address 45 Prospect Hill Rd.

City Branford	State CT	Zip Code 06405
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Yale Univ., H. Hughes Med.	Occupation Professor
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230815

Amount of Each Receipt this Period
 220.00

SUBTOTAL of Receipts This Page (optional).....▶	240.00
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 1607 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Michele Stern
 Full Name (Last, First, Middle Initial)
 Mailing Address 2540 Waterton Way
 City Sacramento State CA Zip Code 95826
 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 ▼ 395.00

Date of Receipt
 12 / 05 / 2014
Transaction ID : 4232367
 Amount of Each Receipt this Period
 50.00

B. Ms. Eve Stern
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 Donnell Street
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4233485
 Amount of Each Receipt this Period
 100.00

C. Ms. Jane Sternberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 250 Turners Crossroad S.
 City Golden Valley State MN Zip Code 55416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PACER Occupation Administration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 12 / 17 / 2014
Transaction ID : 4237442
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 1608 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Beth Stevens
 Full Name (Last, First, Middle Initial)
 Mailing Address 405 Grant Ave
 City Highland Park State NJ Zip Code 08904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Researcher
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 04 / 2014
Transaction ID : 4232213
 Amount of Each Receipt this Period
 100.00

B. Deborah Stevens
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1125
 City Wichita Falls State TX Zip Code 76307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wichita County Occupation Cpa / County Auditor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229701
 Amount of Each Receipt this Period
 25.00

C. Deborah Stevens
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1125
 City Wichita Falls State TX Zip Code 76307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wichita County Occupation Cpa / County Auditor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240152
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... **150.00**
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 1609 OF 2648
	<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)
EMILY's List

A. Ms. Barbara Stevens
Full Name (Last, First, Middle Initial)
Mailing Address 3403 34th Place, N.W.
City Washington State DC Zip Code 20016
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation REQUESTED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **11 / 25 / 2014**
Transaction ID : 4226714
Amount of Each Receipt this Period **100.00**

B. Jeanette M. Stevenson
Full Name (Last, First, Middle Initial)
Mailing Address Box 1954
City Cotuit State MA Zip Code 02635
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **315.00**

Date of Receipt **12 / 15 / 2014**
Transaction ID : 4236705
Amount of Each Receipt this Period **25.00**

C. Ms. Eilyn G. Stevenson
Full Name (Last, First, Middle Initial)
Mailing Address 1ne Lagoon Island Court
City Stuart State FL Zip Code 34996
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 **210.00**

Date of Receipt **12 / 08 / 2014**
Transaction ID : 4233676
Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **145.00**
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 1610 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Elizabeth B. Stewart
 Full Name (Last, First, Middle Initial)
 Mailing Address 5985 Maple Grove Rd
 City Charlevoix State MI Zip Code 49720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bullfrog Right Co Occupation Vice President
 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
 12 / 08 / 2014
Transaction ID : 4233057
 Amount of Each Receipt this Period
 100.00

B. Ms. Audrey K. Stewart
 Full Name (Last, First, Middle Initial)
 Mailing Address 107 Harrogate
 City Saint Simons Island State GA Zip Code 31522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231620
 Amount of Each Receipt this Period
 50.00

C. Charles J. Stewart
 Full Name (Last, First, Middle Initial)
 Mailing Address 6539 Sunny Brae Dr.
 City San Diego State CA Zip Code 92119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Professor Emeritus, Chemistry
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237283
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.00
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 1611 OF 2648
	<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)
EMILY's List

A. Mary Stewart
Full Name (Last, First, Middle Initial)
Mailing Address 1522 Post Alley #208

City Seattle	State WA	Zip Code 98101
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 ▼ 240.00	

Date of Receipt
11 / 25 / 2014
Transaction ID : 4230087

Amount of Each Receipt this Period
20.00

B. Mary Stewart
Full Name (Last, First, Middle Initial)
Mailing Address 1522 Post Alley #208

City Seattle	State WA	Zip Code 98101
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 ▼ 240.00	

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240717

Amount of Each Receipt this Period
20.00

C. Lois Stewart
Full Name (Last, First, Middle Initial)
Mailing Address 8350 Springmill Rd

City Indianapolis	State IN	Zip Code 46260
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 ▼ 275.00	

Date of Receipt
12 / 02 / 2014
Transaction ID : 4231228

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 1612 OF 2648
	(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

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)
EMILY's List

A. Howard Stewart
Full Name (Last, First, Middle Initial)
Mailing Address 3030 S. Ocean Blvd., Apt. 101

City Palm Beach	State FL	Zip Code 33480
--------------------	-------------	-------------------

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 ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2014

Transaction ID : 4238981

Amount of Each Receipt this Period
25.00

B. Ms. Annette Stewart
Full Name (Last, First, Middle Initial)
Mailing Address 1822 Marydale Dr

City Dallas	State TX	Zip Code 75208
----------------	-------------	-------------------

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 ▼
478.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2014

Transaction ID : 4233092

Amount of Each Receipt this Period
214.00

C. Wendy Stewart
Full Name (Last, First, Middle Initial)
Mailing Address 13580 Tollgate Rd.

City Pickerington	State OH	Zip Code 43147
----------------------	-------------	-------------------

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 ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2014

Transaction ID : 4234294

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	289.00
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 1614 OF 2648
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Elizabeth Stewart

Mailing Address 2900 E Millicent Dr

City State Zip Code
Salt Lake Cty UT 84108

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014
Transaction ID : 4237760

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
B. Muriel Steyer

Mailing Address 984 Pine Valley Rd

City State Zip Code
Banning CA 92220

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
246.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014
Transaction ID : 4237540

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
C. Muriel Steyer

Mailing Address 984 Pine Valley Rd

City State Zip Code
Banning CA 92220

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
246.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014
Transaction ID : 4234815

Amount of Each Receipt this Period
53.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 113.00

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 1615 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ruby Stickel		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229345
Mailing Address 62392 Ash Rd		Amount of Each Receipt this Period 25.00
City Wakarusa State IN Zip Code 46573	FEC ID number of contributing federal political committee. C	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Ms. Ruby Stickel		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242365
Mailing Address 62392 Ash Rd		Amount of Each Receipt this Period 25.00
City Wakarusa State IN Zip Code 46573	FEC ID number of contributing federal political committee. C	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Karen Stickle		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237131
Mailing Address 300 Tranquility Lane		Amount of Each Receipt this Period 20.00
City Reading State PA Zip Code 19607	FEC ID number of contributing federal political committee. C	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 1616 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith Stiehm		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243094
Mailing Address 434 24th		Amount of Each Receipt this Period 200.00
City Santa Monica	State CA	Zip Code 90402
FEC ID number of contributing federal political committee. C		
Name of Employer FIU	Occupation PROFESSOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Ms. Ellen Stillpass		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2014 Transaction ID : 4233935
Mailing Address 321 Riverside Dr Apt 25		Amount of Each Receipt this Period 75.00
City Covington	State KY	Zip Code 41011
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Robert Stiteler		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4229793
Mailing Address 5933 - 41st Ave SW		Amount of Each Receipt this Period 15.00
City Seattl	State WA	Zip Code 98136
FEC ID number of contributing federal political committee. C		
Name of Employer Arc Document Solutions	Occupation Planwell Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....▶	290.00
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 1617 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Robert Stiteler

Mailing Address 5933 - 41st Ave SW

City State Zip Code
Seattl WA 98136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Arc Document Solutions Planwell Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240156

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. John Stith

Mailing Address 456 Norwood Avenue

City State Zip Code
Buffalo NY 14222

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
American Portfolios Financial Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228146

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Don Stiver

Mailing Address 1649 Roger Ct,

City State Zip Code
El Cerrito CA 94530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229346

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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 1618 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Don Stiver
Full Name (Last, First, Middle Initial)
Mailing Address 1649 Roger Ct,
City El Cerrito State CA Zip Code 94530
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 ▼ 490.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 28 / 2014
Transaction ID : 4242366
Amount of Each Receipt this Period
20.00

B. Amy Stivers
Full Name (Last, First, Middle Initial)
Mailing Address 2515 Henderson Mill Rd NE
City Atlanta State GA Zip Code 30345
FEC ID number of contributing federal political committee. **C**
Name of Employer Us Physiatry Occupation Nurse Practitioner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 28 / 2014
Transaction ID : 4229347
Amount of Each Receipt this Period
10.00

C. Amy Stivers
Full Name (Last, First, Middle Initial)
Mailing Address 2515 Henderson Mill Rd NE
City Atlanta State GA Zip Code 30345
FEC ID number of contributing federal political committee. **C**
Name of Employer Us Physiatry Occupation Nurse Practitioner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241610
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00
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 1619 OF 2648
	<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)
EMILY's List

A. Amy Stivers
Full Name (Last, First, Middle Initial)
Mailing Address 2515 Henderson Mill Rd NE

City Atlanta	State GA	Zip Code 30345
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Us Physiatry	Occupation Nurse Practitioner
----------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	28	/	2014

Transaction ID : 4229348

Amount of Each Receipt this Period

15.00

B. Amy Stivers
Full Name (Last, First, Middle Initial)
Mailing Address 2515 Henderson Mill Rd NE

City Atlanta	State GA	Zip Code 30345
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Us Physiatry	Occupation Nurse Practitioner
----------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241611

Amount of Each Receipt this Period

15.00

C. Mr. William Stockard
Full Name (Last, First, Middle Initial)
Mailing Address 2640 E Cardella Rd

City Merced	State CA	Zip Code 95340
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **274.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	17	/	2014

Transaction ID : 4237700

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 1620 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. William L. Stockton
 Full Name (Last, First, Middle Initial)
 Mailing Address 336 Fort Washington Ave Apt 6i
 City State Zip Code
 New York NY 10033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Not Employed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : 4239386
 Amount of Each Receipt this Period
 25.00

B. Mr. William L. Stockton
 Full Name (Last, First, Middle Initial)
 Mailing Address 336 Fort Washington Ave Apt 6i
 City State Zip Code
 New York NY 10033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Not Employed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232171
 Amount of Each Receipt this Period
 125.00

C. Darbie Stokes
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Cliffe Avenue
 City State Zip Code
 Lexington MA 02420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Realtor/Physical Therapist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236727
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 1621 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Karen Stoller		Date of Receipt 12 / 15 / 2014 Transaction ID : 4236999
Mailing Address 39 Stratford Ln W Apt C		Amount of Each Receipt this Period 125.00
City Boynton Beach	State FL	Zip Code 33436
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 ▼ 375.00	

Full Name (Last, First, Middle Initial) B. Mr. Peter Stolzman		Date of Receipt 12 / 15 / 2014 Transaction ID : 4236622
Mailing Address 20 Peddlers Drive		Amount of Each Receipt this Period 10.00
City Branford	State CT	Zip Code 06405
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.08	

Full Name (Last, First, Middle Initial) C. Ms. Julia H. Stone		Date of Receipt 12 / 05 / 2014 Transaction ID : 4232808
Mailing Address 759 Orchard SCT		Amount of Each Receipt this Period 15.00
City Louisville	State CO	Zip Code 80027
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1622 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Jessie M Stone
 Full Name (Last, First, Middle Initial)
 Mailing Address 1635 Navellier St
 City State Zip Code
 El Cerrito CA 94530
 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 ▼
 685.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243531
 Amount of Each Receipt this Period
 250.00

B. Ms. Norma K. Stone
 Full Name (Last, First, Middle Initial)
 Mailing Address 3601 Turtle Creek Blvd. #404
 City State Zip Code
 Dallas TX 75219
 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 ▼
 4040.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4244526
 Amount of Each Receipt this Period
 100.00

C. Ms. Norma K. Stone
 Full Name (Last, First, Middle Initial)
 Mailing Address 3601 Turtle Creek Blvd. #404
 City State Zip Code
 Dallas TX 75219
 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 ▼
 4040.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237199
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
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 1623 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margaret Stone
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Trent Court
 City State Zip Code
 Morristown NJ 07960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Nonprofit Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1496.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228148
 Amount of Each Receipt this Period
 83.00

B. Ms. Margaret Stone
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Trent Court
 City State Zip Code
 Morristown NJ 07960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Nonprofit Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1496.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240845
 Amount of Each Receipt this Period
 83.00

C. Ms. Mary L. Stoolmiller
 Full Name (Last, First, Middle Initial)
 Mailing Address 6143 Walker Dr.
 City State Zip Code
 Troy MI 48085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 01 / 2014
Transaction ID : 4230820
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	266.00
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 1624 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sydney Story		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243194
Mailing Address 205 E Terrace Ave		Amount of Each Receipt this Period 35.00
City Fresno	State CA	Zip Code 93704
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 ▼ 380.00	

Full Name (Last, First, Middle Initial) B. Sharon Stout		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 27 / 2014 Transaction ID : 4228353
Mailing Address 210 Wildwood Drive		Amount of Each Receipt this Period 20.00
City Rogersville	State MO	Zip Code 65742
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Sharon Stout		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2014 Transaction ID : 4240985
Mailing Address 210 Wildwood Drive		Amount of Each Receipt this Period 20.00
City Rogersville	State MO	Zip Code 65742
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 1625 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Glenn A. Stover		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014
Mailing Address 2425 22nd Ave		Transaction ID : 4234483
City San Francisco	State CA	Zip Code 94116
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00	
Name of Employer Stoverlaw	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. Mr. Glenn A. Stover		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014
Mailing Address 2425 22nd Ave		Transaction ID : 4237737
City San Francisco	State CA	Zip Code 94116
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer Stoverlaw	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Mr. Philip W. Stoyke		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014
Mailing Address 1853 Highland Parkway		Transaction ID : 4235111
City Saint Paul	State MN	Zip Code 55116
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00	
Name of Employer Requested	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 1626 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Katherine Strandburg
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Bleecker St. Apt. 19D
 City New York State NY Zip Code 10012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New York University Occupation Professor Of Law
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229351
 Amount of Each Receipt this Period
 50.00

B. Ms. Katherine Strandburg
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Bleecker St. Apt. 19D
 City New York State NY Zip Code 10012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New York University Occupation Professor Of Law
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231872
 Amount of Each Receipt this Period
 50.00

C. Ms. Katherine Strandburg
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Bleecker St. Apt. 19D
 City New York State NY Zip Code 10012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New York University Occupation Professor Of Law
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242369
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 1627 OF 2648
	(check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Katherine Strandburg			Date of Receipt												
Mailing Address 100 Bleecker St. Apt. 19D			<table border="1" style="width: 100%;"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y	12		19		2014
M M M	/	D D D	/	Y Y Y Y Y											
12		19		2014											
City State Zip Code New York NY 10012			Transaction ID : 4238985												
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period												
			150.00												
Name of Employer New York University		Occupation Professor Of Law													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼													
		3500.00													

Full Name (Last, First, Middle Initial) B. Mrs. Lynn G. Straus			Date of Receipt												
Mailing Address 1037 Constable Dr.			<table border="1" style="width: 100%;"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y	12		19		2014
M M M	/	D D D	/	Y Y Y Y Y											
12		19		2014											
City State Zip Code Mamaroneck NY 10543			Transaction ID : 4238986												
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period												
			100.00												
Name of Employer None		Occupation None													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼													
		650.00													

Full Name (Last, First, Middle Initial) C. Dr. Paul and Anita Strauss			Date of Receipt												
Mailing Address 7887 Revelle Drive			<table border="1" style="width: 100%;"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>08</td> <td></td> <td>2014</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y	12		08		2014
M M M	/	D D D	/	Y Y Y Y Y											
12		08		2014											
City State Zip Code La Jolla CA 92037			Transaction ID : 4233039												
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period												
			100.00												
Name of Employer None		Occupation None													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼													
		300.00													

SUBTOTAL of Receipts This Page (optional).....▶	350.00
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 1628 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Bruno Strauss
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 NE 65th Street Apt 503
 City State Zip Code
 Seattle WA 98115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230822
 Amount of Each Receipt this Period
 50.00

B. Ms. Judy Strauss
 Full Name (Last, First, Middle Initial)
 Mailing Address 2501 Island View Dr.
 City State Zip Code
 Corona Del Mar CA 92625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229352
 Amount of Each Receipt this Period
 100.00

C. Ms. Judy Strauss
 Full Name (Last, First, Middle Initial)
 Mailing Address 2501 Island View Dr.
 City State Zip Code
 Corona Del Mar CA 92625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242370
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 1629 OF 2648
	<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)
EMILY's List

A. Ms. Terry L. Strauss-White
 Full Name (Last, First, Middle Initial)
 Mailing Address 64 Valley Cir
 City Mill Valley State CA Zip Code 94941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Producer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4235133
 Amount of Each Receipt this Period
 35.00

B. Sandra Jo Streeter
 Full Name (Last, First, Middle Initial)
 Mailing Address Post Office Box 4627
 City Palos Verdes Peninsula State CA Zip Code 90274
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Los Angeles City Attorney's Office Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231599
 Amount of Each Receipt this Period
 50.00

C. Ms. Nancy N. Strickland
 Full Name (Last, First, Middle Initial)
 Mailing Address 351 Fm 575 N.
 City Goldthwaite State TX Zip Code 76844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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
 12 / 08 / 2014
Transaction ID : 4233034
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	185.00
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 1630 OF 2648
	<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)
EMILY's List

A. Dr. Gary E. Striker
Full Name (Last, First, Middle Initial)

Mailing Address 201 E 79th St

City New York State NY Zip Code 10075

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 ▼ 475.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238987

Amount of Each Receipt this Period
50.00

B. Dr. Gary E. Striker
Full Name (Last, First, Middle Initial)

Mailing Address 201 E 79th St

City New York State NY Zip Code 10075

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 ▼ 475.00

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234120

Amount of Each Receipt this Period
100.00

C. Joan Stroh
Full Name (Last, First, Middle Initial)

Mailing Address 376 Center Street #332

City Chula Vista State CA Zip Code 91910

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 ▼ 300.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232974

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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 1631 OF 2648
	<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)
EMILY's List

A. Mrs. Wilma J. Struss
Full Name (Last, First, Middle Initial)

Mailing Address 210 24th St.

City Ames State IA Zip Code 50010

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 ▼ **365.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : 4230823

Amount of Each Receipt this Period
50.00

B. Judith Stuart
Full Name (Last, First, Middle Initial)

Mailing Address 1610 North Prospect Avenue

City Milwaukee State WI Zip Code 53202

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 ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : 4238989

Amount of Each Receipt this Period
100.00

C. Muriel Stubbs
Full Name (Last, First, Middle Initial)

Mailing Address 730 Sleepyvale Lane

City Houston State TX Zip Code 77018

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 ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014

Transaction ID : 4239243

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **180.00**

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 1632 OF 2648
	<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)
EMILY's List

A. Phyllis Arlene Studer
Full Name (Last, First, Middle Initial)
Mailing Address 3486 Power Line Rd
City Walla Walla State WA Zip Code 99362
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233660
Amount of Each Receipt this Period 25.00

B. Mr. Paul R. Stuhmer
Full Name (Last, First, Middle Initial)
Mailing Address 13532 Spinning Wheel Dr.
City Germantown State MD Zip Code 20874
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Insurance
United Educators
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 31 / 2014
Transaction ID : 4243114
Amount of Each Receipt this Period 200.00

C. Harriet Stulman
Full Name (Last, First, Middle Initial)
Mailing Address 5 Hamill Rd Apt C
City Baltimore State MD Zip Code 21210
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation REQUESTED
REQUESTED
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
11 / 25 / 2014
Transaction ID : 4227433
Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 1633 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Phillip R Sturdevant
 Full Name (Last, First, Middle Initial)
 Mailing Address 9026 S. Oxeye Ave
 City Baldwin State MI Zip Code 49304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230123
 Amount of Each Receipt this Period
 20.00

B. Mr. Phillip R Sturdevant
 Full Name (Last, First, Middle Initial)
 Mailing Address 9026 S. Oxeye Ave
 City Baldwin State MI Zip Code 49304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240161
 Amount of Each Receipt this Period
 20.00

C. Mr. Phillip R Sturdevant
 Full Name (Last, First, Middle Initial)
 Mailing Address 9026 S. Oxeye Ave
 City Baldwin State MI Zip Code 49304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240771
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 1634 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ann Forman Sturman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2014
Mailing Address 32033 Royceton CT		Transaction ID : 4231419
City Westlake Village	State CA	Zip Code 91361
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.00
Name of Employer Saa	Occupation Fundraiser	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.00	

Full Name (Last, First, Middle Initial) B. Ms. Aleta Styers		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2014
Mailing Address 301 E. 47th St., Apt. 10j		Transaction ID : 4231231
City New York	State NY	Zip Code 10017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.00
Name of Employer self	Occupation researcher/teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Alejandra Suarez		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014
Mailing Address 5545 27th Avenue NE		Transaction ID : 4244858
City Seattle	State WA	Zip Code 98105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Antioch University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

SUBTOTAL of Receipts This Page (optional).....▶	34.00
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 1635 OF 2648
	<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)
EMILY's List

A. Barbara Suier
Full Name (Last, First, Middle Initial)

Mailing Address 6720 Kentland Ave

City West Hills	State CA	Zip Code 91307
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Gww Llp	Occupation Paralegal
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	14	/	2014

Transaction ID : 4235459

Amount of Each Receipt this Period
20.00

B. Barbara Sullivan
Full Name (Last, First, Middle Initial)

Mailing Address 18911 Gumbo Limbo Ct

City Jupiter	State FL	Zip Code 33458
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Arcadis	Occupation Geologist
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4229355

Amount of Each Receipt this Period
50.00

C. Barbara Sullivan
Full Name (Last, First, Middle Initial)

Mailing Address 18911 Gumbo Limbo Ct

City Jupiter	State FL	Zip Code 33458
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Arcadis	Occupation Geologist
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4242371

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 1636 OF 2648
	<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)
EMILY's List

A. Pamela Sullivan
Full Name (Last, First, Middle Initial)
Mailing Address 305 Big Horn Ridge PI NE
City Albuquerque State NM Zip Code 87122
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation 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
12 / 26 / 2014
Transaction ID : 4240903
Amount of Each Receipt this Period
100.00

B. Dr. Joan Sullivan
Full Name (Last, First, Middle Initial)
Mailing Address 1770 Capell Valley Road
City Napa State CA Zip Code 94558
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : 4232610
Amount of Each Receipt this Period
20.00

C. Deborah Sullivan
Full Name (Last, First, Middle Initial)
Mailing Address 237 Timberline Drive
City Whittier State NC Zip Code 28789
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 ▼ 330.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2014
Transaction ID : 4235875
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 1637 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Deborah Sullivan
 Full Name (Last, First, Middle Initial)
 Mailing Address 237 Timberline Drive
 City Whittier State NC Zip Code 28789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231740
 Amount of Each Receipt this Period
 25.00

B. Ms. Nancy J. Sullivan
 Full Name (Last, First, Middle Initial)
 Mailing Address 349 Lakewood Ln
 City Marquette State MI Zip Code 49855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230824
 Amount of Each Receipt this Period
 125.00

C. Ms. Victoria Sullivan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1345 Webster St.
 City Palo Alto State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235892
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
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 1638 OF 2648
	<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	

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)
EMILY's List

A. Ursula Sulzer
Full Name (Last, First, Middle Initial)
Mailing Address 7066 Cottonwood Knoll

City West Bloomfield	State MI	Zip Code 48322
-------------------------	-------------	-------------------

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 ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4230130

Amount of Each Receipt this Period

25.00

B. Ursula Sulzer
Full Name (Last, First, Middle Initial)
Mailing Address 7066 Cottonwood Knoll

City West Bloomfield	State MI	Zip Code 48322
-------------------------	-------------	-------------------

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 ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240776

Amount of Each Receipt this Period

25.00

C. Dr. Jonathan Sumner
Full Name (Last, First, Middle Initial)
Mailing Address 30 Hempstead Ave., Ste. H8

City Rockville Centre	State NY	Zip Code 11570
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

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
12	/	11	/	2014

Transaction ID : 4234702

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1639 OF 2648
	<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)
EMILY's List

A. Pamela Sutherland
Full Name (Last, First, Middle Initial)
Mailing Address 4223 Cutlass Lane

City Naples	State FL	Zip Code 34102
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Inflection Point Holdings	Occupation Self-Employed
---	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4230015

Amount of Each Receipt this Period

10.00

B. Pamela Sutherland
Full Name (Last, First, Middle Initial)
Mailing Address 4223 Cutlass Lane

City Naples	State FL	Zip Code 34102
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Inflection Point Holdings	Occupation Self-Employed
---	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240634

Amount of Each Receipt this Period

10.00

C. Pamela Sutherland
Full Name (Last, First, Middle Initial)
Mailing Address 4223 Cutlass Lane

City Naples	State FL	Zip Code 34102
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Inflection Point Holdings	Occupation Self-Employed
---	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	11	/	2014

Transaction ID : 4235050

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional).....▶	35.00
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 1640 OF 2648
	<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)
EMILY's List

A. Pamela Sutherland
Full Name (Last, First, Middle Initial)
Mailing Address 4223 Cutlass Lane

City Naples	State FL	Zip Code 34102
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Inflection Point Holdings	Occupation Self-Employed
---	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	30	/	2014

Transaction ID : 4229604

Amount of Each Receipt this Period

25.00

B. Pamela Sutherland
Full Name (Last, First, Middle Initial)
Mailing Address 4223 Cutlass Lane

City Naples	State FL	Zip Code 34102
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Inflection Point Holdings	Occupation Self-Employed
---	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4230149

Amount of Each Receipt this Period

25.00

C. Pamela Sutherland
Full Name (Last, First, Middle Initial)
Mailing Address 4223 Cutlass Lane

City Naples	State FL	Zip Code 34102
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Inflection Point Holdings	Occupation Self-Employed
---	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240796

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 1641 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Pamela Sutherland		Date of Receipt 12 / 28 / 2014 Transaction ID : 4241792
Mailing Address 4223 Cutlass Lane		Amount of Each Receipt this Period 25.00
City Naples	State FL	Zip Code 34102
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Self-Employed	Aggregate Year-to-Date 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Pamela Sutherland		Date of Receipt 12 / 11 / 2014 Transaction ID : 4235049
Mailing Address 4223 Cutlass Lane		Amount of Each Receipt this Period 35.00
City Naples	State FL	Zip Code 34102
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Self-Employed	Aggregate Year-to-Date 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Stanley T. Sutphin		Date of Receipt 12 / 10 / 2014 Transaction ID : 4234612
Mailing Address 7550 N. 16th St., Apt. 5212		Amount of Each Receipt this Period 50.00
City Phoenix	State AZ	Zip Code 85020
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired	Aggregate Year-to-Date 310.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 1642 OF 2648
	<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)
EMILY's List

A. Ms. Lorilee Sutter
 Full Name (Last, First, Middle Initial)
 Mailing Address 1429 College Ave Ste C
 City Modesto State CA Zip Code 95350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Physician
 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
 12 / 01 / 2014
Transaction ID : 4230825
 Amount of Each Receipt this Period
75.00

B. Mr. David C. Sutton
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 2532
 City Champaign State IL Zip Code 61825
 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 ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231710
 Amount of Each Receipt this Period
50.00

C. Ms. Jean Sward
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 Dowitcher Way
 City San Rafael State CA Zip Code 94901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation 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
 12 / 16 / 2014
Transaction ID : 4237333
 Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 1643 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Merlin Swartz

Mailing Address 3 Madel Lane

City Bedford State MA Zip Code 01730

FEC ID number of contributing federal political committee. **C**

Name of Employer Boston University Occupation Professor Emeritus

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **643.00**

Date of Receipt
12 / 01 / 2014

Transaction ID : 4230827

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Mr. Merlin Swartz

Mailing Address 3 Madel Lane

City Bedford State MA Zip Code 01730

FEC ID number of contributing federal political committee. **C**

Name of Employer Boston University Occupation Professor Emeritus

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **643.00**

Date of Receipt
12 / 27 / 2014

Transaction ID : 4241031

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Mr. Merlin Swartz

Mailing Address 3 Madel Lane

City Bedford State MA Zip Code 01730

FEC ID number of contributing federal political committee. **C**

Name of Employer Boston University Occupation Professor Emeritus

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **643.00**

Date of Receipt
12 / 30 / 2014

Transaction ID : 4242772

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **150.00**

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 1644 OF 2648
	<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)
EMILY's List

A. Dennis Swartzlander
Full Name (Last, First, Middle Initial)

Mailing Address 140 W Franklin St
#812

City Chapel Hill State NC Zip Code 27516

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 ▼
340.00

Date of Receipt
12 / 09 / 2014
Transaction ID : 4234095

Amount of Each Receipt this Period
35.00

B. Dennis Swartzlander
Full Name (Last, First, Middle Initial)

Mailing Address 140 W Franklin St
#812

City Chapel Hill State NC Zip Code 27516

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 ▼
340.00

Date of Receipt
12 / 19 / 2014
Transaction ID : 4238994

Amount of Each Receipt this Period
50.00

C. Ms. Lucinda E Swearingen
Full Name (Last, First, Middle Initial)

Mailing Address 104 North Roosevelt Avenue

City Fort Collins State CO Zip Code 80521

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232914

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 1645 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Ms. Lucinda E Swearingen
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 North Roosevelt Avenue
 City Fort Collins State CO Zip Code 80521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4238995
 Amount of Each Receipt this Period
 200.00

B. Jesse Sweetwater
 Full Name (Last, First, Middle Initial)
 Mailing Address 160 Rickard Drive
 City Aptos State CA Zip Code 95003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 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
 12 / 30 / 2014
Transaction ID : 4242939
 Amount of Each Receipt this Period
 100.00

C. Steven Swengel
 Full Name (Last, First, Middle Initial)
 Mailing Address 5488 Quail Meadows Drive
 City Carmel State CA Zip Code 93923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235858
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
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 1646 OF 2648
	<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

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Charles Lawrence Swezey		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237518
Mailing Address 212 Fulton St.		Amount of Each Receipt this Period 1000.00
City Palo Alto	State CA	Zip Code 94301
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 ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Jane Swicegood		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4235198
Mailing Address 5050 N Campbell Ave		Amount of Each Receipt this Period 25.00
City Tucson	State AZ	Zip Code 85718
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary Ann Swierc		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230828
Mailing Address 7703 Wexford Rdg		Amount of Each Receipt this Period 150.00
City San Antonio	State TX	Zip Code 78240
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 ▼ 800.00	

SUBTOTAL of Receipts This Page (optional).....▶	1175.00
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 1647 OF 2648
	(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)
EMILY's List

A. Mr. Leonard F. Swift
Full Name (Last, First, Middle Initial)

Mailing Address 3205 Wake Robin Drive

City Shelburne State VT Zip Code 05482

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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : 4230829

Amount of Each Receipt this Period
 50.00

B. Mr. David Swinehart
Full Name (Last, First, Middle Initial)

Mailing Address 1105 E Southway Blvd

City Kokomo State IN Zip Code 46902

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014

Transaction ID : 4239119

Amount of Each Receipt this Period
 15.00

C. Dale W. Swinney
Full Name (Last, First, Middle Initial)

Mailing Address 701 W. Herbert Ave., Apt. 57

City Reedley State CA Zip Code 93654

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 515.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014

Transaction ID : 4236038

Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00

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 1648 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Susan M. Sylvan
 Full Name (Last, First, Middle Initial)
 Mailing Address 345 E. 94th St. Apt 9-G
 City New York State NY Zip Code 10128
 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 **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2014
Transaction ID : 4244878
 Amount of Each Receipt this Period
50.00

B. Mr. James E. Syphers
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 Church St.
 City Hopwood State PA Zip Code 15445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **487.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230044
 Amount of Each Receipt this Period
15.00

C. Mr. James E. Syphers
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 Church St.
 City Hopwood State PA Zip Code 15445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **487.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240657
 Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....	80.00
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 1650 OF 2648
	<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)
EMILY's List

A. Ms. Karen Joanne Syzmanski
Full Name (Last, First, Middle Initial)
Mailing Address 113 Princeton Rd.
City Menlo Park State CA Zip Code 94025
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 ▼ 350.00

Date of Receipt 12 / 29 / 2014
Transaction ID : 4242675
Amount of Each Receipt this Period 50.00

B. Ms. Kate Szurek
Full Name (Last, First, Middle Initial)
Mailing Address 17494 Pull And Be Damned Rd
City La Conner State WA Zip Code 98257
FEC ID number of contributing federal political committee. **C**
Name of Employer Skagit Law Group, PLLC Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 19 / 2014
Transaction ID : 4238996
Amount of Each Receipt this Period 15.00

C. Ms. Tobi Tabor
Full Name (Last, First, Middle Initial)
Mailing Address 419 Azaleadell Drive
City Houston State TX Zip Code 77018
FEC ID number of contributing federal political committee. **C**
Name of Employer University Of Houston Occupation Clinical Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 430.16

Date of Receipt 12 / 15 / 2014
Transaction ID : 4236803
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.00
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 1651 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Virginia S. Tafel

Mailing Address 5670 Pfeiffer Rd.

City State Zip Code
Cincinnati OH 45242

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 ▼
710.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : 4232291

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Mrs. Frances P. Taft

Mailing Address 6 Pepper Ridge Rd.

City State Zip Code
Cleveland OH 44124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227635

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Ms. Nancy M. Taggard

Mailing Address PO Box 2329

City State Zip Code
Gearhart OR 97138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Russ Taggard Co. Business Owner

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
 12 / 11 / 2014
Transaction ID : 4234709

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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 1652 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Melinda Taintor		Date of Receipt
Mailing Address PO Box 383		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bellevue	WA	98009
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4242519
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Sandy Talbot		Date of Receipt
Mailing Address 3875 Waldenwood Drive		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Ann Arbor	MI	48105
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4231235
Name of Employer	Occupation	Amount of Each Receipt this Period
First Presbyterian Church	Nurse	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="450.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Ruth B. Talley		Date of Receipt
Mailing Address 1302 Anglers Ln		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Lutz	FL	33548
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4237029
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1150.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1653 OF 2648
	<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)
EMILY's List

A. Mr. Randall Talley
Full Name (Last, First, Middle Initial)

Mailing Address 158 Alice Avneue

City Campbell State CA Zip Code 95008

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

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
 12 / 01 / 2014

Transaction ID : 4230830

Amount of Each Receipt this Period
150.00

B. Ms. Rita Tamerius
Full Name (Last, First, Middle Initial)

Mailing Address 2707 Prince St

City Berkeley State CA Zip Code 94705

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 ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014

Transaction ID : 4235977

Amount of Each Receipt this Period
10.00

C. Satoru Taniguchi
Full Name (Last, First, Middle Initial)

Mailing Address 206 Bockius St.

City Watsonville State CA Zip Code 95076

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 ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014

Transaction ID : 4238285

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	310.00
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 1654 OF 2648
	<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)
EMILY's List

A. Ms. Pamela E. Tarr
 Full Name (Last, First, Middle Initial)
 Mailing Address 12223 Califa Street
 City Valley Village State CA Zip Code 91607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Producer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240164
 Amount of Each Receipt this Period
 15.00

B. Sarah Tate
 Full Name (Last, First, Middle Initial)
 Mailing Address 3040 Grand Bay Blvd. , Unit 295
 City Longboat Key State FL Zip Code 34228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Non
 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
 12 / 01 / 2014
Transaction ID : 4230831
 Amount of Each Receipt this Period
 100.00

C. Dr. Priscilla W Tate
 Full Name (Last, First, Middle Initial)
 Mailing Address 5430 Regal Dr
 City Fort Worth State TX Zip Code 76132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233403
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	165.00
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 1655 OF 2648
	<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)
EMILY's List

A. Dr. Elda Tate
Full Name (Last, First, Middle Initial)
Mailing Address 814 W. College

City Marquette	State MI	Zip Code 49855
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None (Retired)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Date of Receipt
11 / 26 / 2014
Transaction ID : 4228155

Amount of Each Receipt this Period
100.00

B. Ms. Geraldine N. Tatham
Full Name (Last, First, Middle Initial)
Mailing Address 608 Navigators Way

City Edgewater	State FL	Zip Code 32141
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

Date of Receipt
12 / 23 / 2014
Transaction ID : 4240165

Amount of Each Receipt this Period
25.00

C. Ms. Marilyn Tausend
Full Name (Last, First, Middle Initial)
Mailing Address 6023 Reid DR NW

City Gig Harbor	State WA	Zip Code 98335
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
12 / 29 / 2014
Transaction ID : 4242533

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 1656 OF 2648
	<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)
EMILY's List

A. Ms. Jane Taves
Full Name (Last, First, Middle Initial)
Mailing Address 7870 Woodpond Tr
City Cross Plains State WI Zip Code 53528
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 **850.00**

Date of Receipt
12 / 03 / 2014
Transaction ID : 4231852
Amount of Each Receipt this Period
50.00

B. Ms. Ladonna Taylor
Full Name (Last, First, Middle Initial)
Mailing Address 827 Madison St
City Evanston State IL Zip Code 60202
FEC ID number of contributing federal political committee. **C**
Name of Employer Evanston Hospital Occupation RN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **240.00**

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240354
Amount of Each Receipt this Period
30.00

C. Mr. Robert F. Taylor
Full Name (Last, First, Middle Initial)
Mailing Address 88d Grove St.
City Clinton State CT Zip Code 06413
FEC ID number of contributing federal political committee. **C**
Name of Employer Jacob Erecting Occupation Construction Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **225.00**

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230835
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... **105.00**
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 1657 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Jean E Taylor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241571
Mailing Address 2025 Broadway Apt 30d		Amount of Each Receipt this Period 15.00
City New York	State NY	Zip Code 10023
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2265.00	

Full Name (Last, First, Middle Initial) B. Mr. Thomas Taylor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4240167
Mailing Address 4040 Sierra Park Ter		Amount of Each Receipt this Period 60.00
City Beavercreek	State OH	Zip Code 45440
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Pat Taylor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229362
Mailing Address 2245 Penrose Lane		Amount of Each Receipt this Period 25.00
City Fairbanks	State AK	Zip Code 99709
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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 1658 OF 2648
	<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)
EMILY's List

A. Pat Taylor
Full Name (Last, First, Middle Initial)
Mailing Address 2245 Penrose Lane

City Fairbanks	State AK	Zip Code 99709
-------------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241783

Amount of Each Receipt this Period

55.00	25.00
-------	-------

B. Ms. Stephanie Taylor
Full Name (Last, First, Middle Initial)
Mailing Address 9 Samoset Rd

City Woburn	State MA	Zip Code 01801
----------------	-------------	-------------------

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 ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2014

Transaction ID : 4228312

Amount of Each Receipt this Period

15.00

C. Ms. Stephanie Taylor
Full Name (Last, First, Middle Initial)
Mailing Address 9 Samoset Rd

City Woburn	State MA	Zip Code 01801
----------------	-------------	-------------------

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 ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2014

Transaction ID : 4241158

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 1659 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Penelope A. Taylor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 1513 Calypso Drive		Transaction ID : 4229363
City Aptos	State CA	Zip Code 95003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
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 ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Ms. Penelope A. Taylor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
Mailing Address 1513 Calypso Drive		Transaction ID : 4242375
City Aptos	State CA	Zip Code 95003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
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 ▼ 750.00	

Full Name (Last, First, Middle Initial) C. Ms. Betty Taylor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014
Mailing Address 52 Eastwood Dr		Transaction ID : 4227763
City Hutchinson	State KS	Zip Code 67502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 1660 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Christiana Taylor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237323
Mailing Address 37816 160th PI SE		Amount of Each Receipt this Period 5.00
City Auburn	State WA	Zip Code 98092
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 ▼ 340.00	

Full Name (Last, First, Middle Initial) B. Christiana Taylor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240930
Mailing Address 37816 160th PI SE		Amount of Each Receipt this Period 20.00
City Auburn	State WA	Zip Code 98092
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 ▼ 340.00	

Full Name (Last, First, Middle Initial) C. Ms. Diana Taylor		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014 Transaction ID : 4231767
Mailing Address 640 Davis St., #13		Amount of Each Receipt this Period 35.00
City San Francisco	State CA	Zip Code 94111
FEC ID number of contributing federal political committee. C	Name of Employer University Of California, San Francisc	Occupation Professor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 1661 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Francie F. Teitelbaum			Date of Receipt
Mailing Address 5212 Grant Ave			<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4239149
Carmichael	CA	95608	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="35.00"/>
Name of Employer	Occupation		
N/A	Teacher (Retired)		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="420.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Beth M. Teitelman			Date of Receipt
Mailing Address 310 West End Ave			<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4239002
New York	NY	10023	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
92y	Program Director		
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. Beata Teixeira De Mattos			Date of Receipt
Mailing Address 20 E Franklin Ave			<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4229364
Pennington	NJ	08534	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="15.00"/>
Name of Employer	Occupation		
None	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) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1662 OF 2648
	<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)
EMILY's List

A. Anne Tekmen
Full Name (Last, First, Middle Initial)

Mailing Address 3109 Belvin Dr.

City Raleigh	State NC	Zip Code 27609
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Wake Tech Community College	Occupation Teacher
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	05	/	2014

Transaction ID : 4232773

Amount of Each Receipt this Period
20.00

B. Debbie Tellman
Full Name (Last, First, Middle Initial)

Mailing Address 42 S. Broad St

City BREVARD	State NC	Zip Code 28712
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Bakery Owner
-----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4230099

Amount of Each Receipt this Period
20.00

C. Debbie Tellman
Full Name (Last, First, Middle Initial)

Mailing Address 42 S. Broad St

City BREVARD	State NC	Zip Code 28712
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Bakery Owner
-----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240724

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 1663 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Susan Temple		Date of Receipt
Mailing Address 945 Locust Ave		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Charlottesville	VA	22901
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4234248
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="230.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Barbara Jean Temple		Date of Receipt
Mailing Address 130 Skyfield Dr		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Groton	MA	01450
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4237748
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Diane P. Temple		Date of Receipt
Mailing Address 86 Main Street P.O. Box 1489		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Pepperell	MA	01463
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4229817
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="665.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="55.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1664 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Diane P. Temple

Mailing Address 86 Main Street
P.O. Box 1489

City Pepperell State MA Zip Code 01463

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4240168

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Ms. Diane P. Temple

Mailing Address 86 Main Street
P.O. Box 1489

City Pepperell State MA Zip Code 01463

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237848

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
C. Ms. Diane P. Temple

Mailing Address 86 Main Street
P.O. Box 1489

City Pepperell State MA Zip Code 01463

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014

Transaction ID : 4237849

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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 1665 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carla J. Tenret		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2014 Transaction ID : 4231241
Mailing Address 623 Cornell Ave		Amount of Each Receipt this Period 53.00
City Albany	State CA	Zip Code 94706
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 ▼ 261.00	

Full Name (Last, First, Middle Initial) B. Ms. Doris Teplitz		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229365
Mailing Address 8615 Terrace Garden Way		Amount of Each Receipt this Period 150.00
City Bethesda	State MD	Zip Code 20814
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Physicist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2050.00	

Full Name (Last, First, Middle Initial) C. Ms. Doris Teplitz		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242376
Mailing Address 8615 Terrace Garden Way		Amount of Each Receipt this Period 150.00
City Bethesda	State MD	Zip Code 20814
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Physicist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2050.00	

SUBTOTAL of Receipts This Page (optional).....▶	353.00
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 1667 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Pat M. Tessler
 Full Name (Last, First, Middle Initial)
 Mailing Address 4254 Sherwood Forest Ct.
 City Ann Arbor State MI Zip Code 48103
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233249
 Amount of Each Receipt this Period
 100.00

B. Mr. Jerome Testo
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 320267
 City San Francisco State CA Zip Code 94132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239550
 Amount of Each Receipt this Period
 200.00

C. Ms. Anne Tetreault
 Full Name (Last, First, Middle Initial)
 Mailing Address 66 Pinedale St
 City Southbridge State MA Zip Code 01550
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230837
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 1668 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kathleen Thaxton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237250
Mailing Address PO Box 334		Amount of Each Receipt this Period 50.00
City North Stonington	State CT	Zip Code 06359
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) B. Sylvia Thayer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4234836
Mailing Address Sylvia L Thayer		Amount of Each Receipt this Period 200.00
City Milton	State NH	Zip Code 03851
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth C. Theil		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2014 Transaction ID : 4242630
Mailing Address 912 Cole Street, #158		Amount of Each Receipt this Period 300.00
City San Francisco	State CA	Zip Code 94117
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 ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 1669 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Celeste Thisis
 Full Name (Last, First, Middle Initial)
 Mailing Address 384 Blinn Rd
 City Croton on Hudson State NY Zip Code 10520
 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 ▼
 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234907
 Amount of Each Receipt this Period
 10.00

B. Mrs. Joyce M. Thibodeaux
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 Oakdale Loop
 City Houma State LA Zip Code 70360
 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 ▼
 4020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235588
 Amount of Each Receipt this Period
 25.00

C. Mrs. Joyce M. Thibodeaux
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 Oakdale Loop
 City Houma State LA Zip Code 70360
 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 ▼
 4020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4237987
 Amount of Each Receipt this Period
 260.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 295.00
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 1670 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara H. Thimsen		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2014 Transaction ID : 4244840
Mailing Address 4165 N. Sandcastle Place		Amount of Each Receipt this Period 30.00
City Boise	State ID	Zip Code 83703
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 ▼ 740.00	

Full Name (Last, First, Middle Initial) B. Mr. Keith Thomas		Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230840
Mailing Address 1116 E Sanson Ave		Amount of Each Receipt this Period 225.00
City Spokane	State WA	Zip Code 99207
FEC ID number of contributing federal political committee. C		
Name of Employer Deaconess Hospital	Occupation Housekeeper li	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Ms. Barbara F. Thomas		Date of Receipt M M / D D / Y Y Y Y 11 / 30 / 2014 Transaction ID : 4229651
Mailing Address 238 E Brown Ave		Amount of Each Receipt this Period 10.00
City Fresno	State CA	Zip Code 93704
FEC ID number of contributing federal political committee. C		
Name of Employer Fresnoco@Comcast.Net	Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional).....▶	265.00
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 1671 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara F. Thomas			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241243
Mailing Address 238 E Brown Ave			Amount of Each Receipt this Period 10.00
City Fresno	State CA	Zip Code 93704	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 210.00	
Name of Employer Fresnoco@Comcast.Net		Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Barbara F. Thomas			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2014 Transaction ID : 4236379
Mailing Address 238 E Brown Ave			Amount of Each Receipt this Period 30.00
City Fresno	State CA	Zip Code 93704	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 210.00	
Name of Employer Fresnoco@Comcast.Net		Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Stephen Thomas			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4239003
Mailing Address 325 W Franklin St Suite 111			Amount of Each Receipt this Period 250.00
City Tucson	State AZ	Zip Code 85718	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 500.00	
Name of Employer None		Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	290.00
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 1672 OF 2648
	<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)
EMILY's List

A. Ms. Betty H. Thomas
Full Name (Last, First, Middle Initial)
Mailing Address 8617 Wood Violet Way
City Madison State WI Zip Code 53717
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 ▼ 325.00

Date of Receipt 12 / 19 / 2014
Transaction ID : 4239005
Amount of Each Receipt this Period 25.00

B. Mrs. Anne H Thomas
Full Name (Last, First, Middle Initial)
Mailing Address 19375 Cypress Ridge Terrace #601
City Leesburg State VA Zip Code 20176
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 ▼ 1300.00

Date of Receipt 12 / 06 / 2014
Transaction ID : 4232433
Amount of Each Receipt this Period 100.00

C. Mr. Patrick Thompson
Full Name (Last, First, Middle Initial)
Mailing Address 477 N Mondel Dr
City Gilbert State AZ Zip Code 85233
FEC ID number of contributing federal political committee. **C**
Name of Employer Arizona State University Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 26 / 2014
Transaction ID : 4230199
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
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 1673 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Patrick Thompson
 Full Name (Last, First, Middle Initial)
 Mailing Address 477 N Mondel Dr
 City State Zip Code
 Gilbert AZ 85233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Arizona State University Professor
 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
 12 / 26 / 2014
Transaction ID : 4244917
 Amount of Each Receipt this Period
 25.00

B. Joyce Thompson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 135
 City State Zip Code
 Craryville NY 12521
 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 ▼
 293.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228237
 Amount of Each Receipt this Period
 10.00

C. Joyce Thompson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 135
 City State Zip Code
 Craryville NY 12521
 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 ▼
 293.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241104
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 1674 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Joyce Thompson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014
Mailing Address PO Box 135		Transaction ID : 4236847
City Craryville	State NY	Zip Code 12521
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 293.00	

Full Name (Last, First, Middle Initial) B. Dr. Robert S. Thompson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 16316 Alpine Drive East		Transaction ID : 4229369
City Enumclaw	State WA	Zip Code 98022
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1161.00	

Full Name (Last, First, Middle Initial) C. Dr. Robert S. Thompson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014
Mailing Address 16316 Alpine Drive East		Transaction ID : 4230843
City Enumclaw	State WA	Zip Code 98022
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1161.00	

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1675 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Robert S. Thompson
 Full Name (Last, First, Middle Initial)
 Mailing Address 16316 Alpine Drive East
 City State Zip Code
 Enumclaw WA 98022
 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 ▼
 1161.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241573
 Amount of Each Receipt this Period
 50.00

B. Dr. Peter K. Thompson
 Full Name (Last, First, Middle Initial)
 Mailing Address 307 Fall River Court
 City State Zip Code
 Houston TX 77024
 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 ▼
 1175.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014
Transaction ID : 4229621
 Amount of Each Receipt this Period
 50.00

C. Dr. Peter K. Thompson
 Full Name (Last, First, Middle Initial)
 Mailing Address 307 Fall River Court
 City State Zip Code
 Houston TX 77024
 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 ▼
 1175.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241572
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 1676 OF 2648
	<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)
EMILY's List

A. R. B. Thompson
Full Name (Last, First, Middle Initial)

Mailing Address 626 E Calhoun St

City Woodstock State IL Zip Code 60098

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 ▼ 264.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4236521

Amount of Each Receipt this Period
 66.00

B. Ms. Jane N. Thompson
Full Name (Last, First, Middle Initial)

Mailing Address 636 Cheyenne Dr. #23

City Fort Collins State CO Zip Code 80525

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 ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014

Transaction ID : 4237088

Amount of Each Receipt this Period
 10.00

C. Mr. James Thompson
Full Name (Last, First, Middle Initial)

Mailing Address 331 S Columbia Dr

City Woodburn State OR Zip Code 97071

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 ▼ 288.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014

Transaction ID : 4227716

Amount of Each Receipt this Period
 38.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 114.00

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 1677 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Dana L. Thompson
 Full Name (Last, First, Middle Initial)
 Mailing Address 486 Wraight Ave
 City Los Gatos State CA Zip Code 95032
 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 ▼ 313.00

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231245
 Amount of Each Receipt this Period
 38.00

B. Ms. Dana L. Thompson
 Full Name (Last, First, Middle Initial)
 Mailing Address 486 Wraight Ave
 City Los Gatos State CA Zip Code 95032
 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 ▼ 313.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236392
 Amount of Each Receipt this Period
 50.00

C. Ms. Susan Thompson
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 Shaw St.
 City Manchester State NH Zip Code 03104
 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 ▼ 550.00

Date of Receipt
 11 / 26 / 2014
Transaction ID : 4227677
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 188.00
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 1678 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Anne Thompson

Mailing Address PO Box 1498

City Southern Pines State NC Zip Code 28388

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233048

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Ms. Maureen M. Thompson

Mailing Address 2339 Buckley Road

City Columbus State OH Zip Code 43220

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

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
 12 / 13 / 2014
Transaction ID : 4236357

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Ms. Barbara Thomson

Mailing Address 19 Oak Ridge

City Springfield State NJ Zip Code 07081

FEC ID number of contributing federal political committee. **C**

Name of Employer First Congregational Church Of Westfie Occupation Music Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228386

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 1679 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Thomson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2014
Mailing Address 19 Oak Ridge		Transaction ID : 4240979
City Springfield	State NJ	Zip Code 07081
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer First Congregational Church Of Westfie	Occupation Music Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) B. Mr. Carl Thoresen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014
Mailing Address 800 Blossom Hill Rd Unit P383		Transaction ID : 4232650
City Los Gatos	State CA	Zip Code 95032
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
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 ▼ 2950.00	

Full Name (Last, First, Middle Initial) C. Ms. Janice Thorne		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014
Mailing Address 406 S. Coeur Dalene St., Apt. E.		Transaction ID : 4234373
City Spokane	State WA	Zip Code 99201
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	650.00
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 1680 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith Z. Thorne		Date of Receipt 12 / 15 / 2014 Transaction ID : 4236391
Mailing Address 11930 Escalante Ct.		Amount of Each Receipt this Period 100.00
City Reston	State VA	Zip Code 20191
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 ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Dr. Judy M Thorne		Date of Receipt 12 / 11 / 2014 Transaction ID : 4235130
Mailing Address 316 November Dr		Amount of Each Receipt this Period 20.00
City Durham	State NC	Zip Code 27712
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Education Research	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00	

Full Name (Last, First, Middle Initial) C. Dr. Judy M Thorne		Date of Receipt 12 / 17 / 2014 Transaction ID : 4237947
Mailing Address 316 November Dr		Amount of Each Receipt this Period 35.00
City Durham	State NC	Zip Code 27712
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Education Research	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00	

SUBTOTAL of Receipts This Page (optional).....▶	155.00
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 1681 OF 2648
	<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)
EMILY's List

A. Dr. Judy M Thorne
Full Name (Last, First, Middle Initial)

Mailing Address 316 November Dr

City Durham State NC Zip Code 27712

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Education Research

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **595.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014

Transaction ID : 4228160

Amount of Each Receipt this Period
50.00

B. Ms. Judith Thoyer
Full Name (Last, First, Middle Initial)

Mailing Address 1115 Fifth Avenue

City New York State NY Zip Code 10128

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 ▼ **2150.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2014

Transaction ID : 4242662

Amount of Each Receipt this Period
1150.00

C. Mrs. Heidi T Thumlert
Full Name (Last, First, Middle Initial)

Mailing Address 248 West Essex Street

City Stockton State CA Zip Code 95204

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

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
12 / 14 / 2014

Transaction ID : 4235427

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....▶	1215.00
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 1682 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elizabeth Thunman		Date of Receipt
Mailing Address 1516 S. Willemore Ave.		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Springfield	IL	62704
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	Transaction ID : 4233823
Requested	Requested	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	<input type="text" value="100.00"/>

Full Name (Last, First, Middle Initial) B. Dr. Amy Tiemann		Date of Receipt
Mailing Address 125 Graylyn Drive		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chapel Hill	NC	27516
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	Transaction ID : 4228161
Spark Productions	Producer	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1270.00"/>	<input type="text" value="50.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Patricia A. Tillson		Date of Receipt
Mailing Address 13607 Lesota Ct.		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cypress	TX	77429
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	Transaction ID : 4232008
Self	Psychotherapist	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="590.00"/>	<input type="text" value="20.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="170.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1683 OF 2648
	<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	

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)
EMILY's List

A. Ms. Kathryn L. Tillson
Full Name (Last, First, Middle Initial)

Mailing Address 8006 Walden Road

City Baton Rouge State LA Zip Code 70808

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Investment

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2014
Transaction ID : 4244841

Amount of Each Receipt this Period 200.00

B. Ms. Charla Tilton
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 537

City Quinter State KS Zip Code 67752

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt 12 / 08 / 2014
Transaction ID : 4233064

Amount of Each Receipt this Period 60.00

C. Ms. Barbara Jo Timmer
Full Name (Last, First, Middle Initial)

Mailing Address 8100 Russell Ave. S., Unit 414

City Minneapolis State MN Zip Code 55431

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 12 / 01 / 2014
Transaction ID : 4230845

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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 1684 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Michele Tinetti		Date of Receipt M M / D D / Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230025
Mailing Address 2847 26th Street NW		Amount of Each Receipt this Period 10.00
City Rochester	State MN	Zip Code 55901
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 ▼ 220.00	

Full Name (Last, First, Middle Initial) B. Michele Tinetti		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2014 Transaction ID : 4239006
Mailing Address 2847 26th Street NW		Amount of Each Receipt this Period 10.00
City Rochester	State MN	Zip Code 55901
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 ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Michele Tinetti		Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240642
Mailing Address 2847 26th Street NW		Amount of Each Receipt this Period 10.00
City Rochester	State MN	Zip Code 55901
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 ▼ 220.00	

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 1685 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Gregory Tipple
 Full Name (Last, First, Middle Initial)
 Mailing Address 1907 W. 34th St.
 City Austin State TX Zip Code 78703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Commission On Environmental Qual Occupation Geoscientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236358
 Amount of Each Receipt this Period
 200.00

B. Ms. Ann H. Tobin
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 667017
 City Pompano Beach State FL Zip Code 33066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241018
 Amount of Each Receipt this Period
 35.00

C. Ms. Karen Rohne Todd
 Full Name (Last, First, Middle Initial)
 Mailing Address 63 Clinton St.
 City Lambertville State NJ Zip Code 08530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237313
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	270.00
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 1686 OF 2648
	<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)
EMILY's List

A. Mr. Edward J. Todd
 Full Name (Last, First, Middle Initial)
 Mailing Address 1674 Barnes Rd
 City Muskegon State MI Zip Code 49442
 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 ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4236024
 Amount of Each Receipt this Period
 20.00

B. Ms. Linda Todd
 Full Name (Last, First, Middle Initial)
 Mailing Address 5080 W. Mercer Way
 City Mercer Island State WA Zip Code 98040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Guide, Bd. Exec., Event Planner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231924
 Amount of Each Receipt this Period
 50.00

C. Mr. Daniel Toft
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 226
 City Peterson State IA Zip Code 51047
 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 ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237714
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 1687 OF 2648
	<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)
EMILY's List

A. John E. Tolman
Full Name (Last, First, Middle Initial)

Mailing Address 275 North Rd

City Lancaster State NH Zip Code 03584

FEC ID number of contributing federal political committee. **C**

Name of Employer Nea-Nh Occupation Labor Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 428.00

Date of Receipt
 12 / 16 / 2014
Transaction ID : 4237188

Amount of Each Receipt this Period
 50.00

B. Mr. John Tolonen
Full Name (Last, First, Middle Initial)

Mailing Address 12307 Marble Rd

City Yakima State WA Zip Code 98908

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 12 / 01 / 2014
Transaction ID : 4230846

Amount of Each Receipt this Period
 150.00

C. Ms. Elizabeth M. Tomic
Full Name (Last, First, Middle Initial)

Mailing Address 21 Furnace Dock Rd

City Croton On Hudson State NY Zip Code 10520

FEC ID number of contributing federal political committee. **C**

Name of Employer Lapine Group Inc. Occupation Business

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 11 / 25 / 2014
Transaction ID : 4230082

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 1688 OF 2648
	(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)
EMILY's List

A. Ms. Elizabeth M. Tomic
Full Name (Last, First, Middle Initial)
Mailing Address 21 Furnace Dock Rd
City Croton On Hudson State NY Zip Code 10520
FEC ID number of contributing federal political committee. **C**
Name of Employer Lapine Group Inc. Occupation Business
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014
Transaction ID : 4240713
Amount of Each Receipt this Period
25.00

B. Ms. Marlene Sanders Toobin
Full Name (Last, First, Middle Initial)
Mailing Address 670 W End Ave., Apt. 14A
City New York State NY Zip Code 10025
FEC ID number of contributing federal political committee. **C**
Name of Employer Nyu Occupation Professor
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 / 25 / 2014
Transaction ID : 4227458
Amount of Each Receipt this Period
150.00

C. Ms. Janine M Torresson
Full Name (Last, First, Middle Initial)
Mailing Address 12 Fourth Avenue
City Massapequa Pk State NY Zip Code 11762
FEC ID number of contributing federal political committee. **C**
Name of Employer Hwufsd Occupation Educator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : 4232816
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 1689 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cecile Tougas		Date of Receipt
Mailing Address 2700 Sarah Avenue		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Durham	State NC	Zip Code 27707
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4230100
Name of Employer North Carolina School Of Science And M		Amount of Each Receipt this Period
Occupation Teacher		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) B. Cecile Tougas		Date of Receipt
Mailing Address 2700 Sarah Avenue		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Durham	State NC	Zip Code 27707
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4240726
Name of Employer North Carolina School Of Science And M		Amount of Each Receipt this Period
Occupation Teacher		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) C. John Toya		Date of Receipt
Mailing Address 1040 Fulton St Apt. 1		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City San Francisco	State CA	Zip Code 94117
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4230198
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		<input type="text" value="15.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="330.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="55.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1690 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. John Toya		Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2014 Transaction ID : 4244916
Mailing Address 1040 Fulton St Apt. 1		Amount of Each Receipt this Period 15.00
City San Francisco	State CA	Zip Code 94117
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) B. Ms. Rebecca Tracy		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2014 Transaction ID : 4239068
Mailing Address 2611 Derby Street		Amount of Each Receipt this Period 20.00
City Berkeley	State CA	Zip Code 94705
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 ▼ 270.00	

Full Name (Last, First, Middle Initial) C. Ms. Judith G. Tracy		Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2014 Transaction ID : 4230849
Mailing Address 3881 San Ysidro Way		Amount of Each Receipt this Period 125.00
City Sacramento	State CA	Zip Code 95864
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	

SUBTOTAL of Receipts This Page (optional).....▶	160.00
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 1691 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ellen Traeger		Date of Receipt
Mailing Address W12449 Northern Cross Arm		M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014
City	State	Zip Code
Lodi	WI	53555
FEC ID number of contributing federal political committee.		Transaction ID : 4231755
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		20.00
Name of Employer	Occupation	
Nordic Consulting	Consultant	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	330.00	

Full Name (Last, First, Middle Initial) B. Mr. Donald M. Traunstein		Date of Receipt
Mailing Address 2 Tryon Ave Apt 307		M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2014
City	State	Zip Code
Schenectady	NY	12302
FEC ID number of contributing federal political committee.		Transaction ID : 4234853
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		25.00
Name of Employer	Occupation	
Requested	Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	300.00	

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth L. Travis		Date of Receipt
Mailing Address 1700 Sunset Blvd, Unit H		M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2014
City	State	Zip Code
Houston	TX	77005
FEC ID number of contributing federal political committee.		Transaction ID : 4239467
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		1000.00
Name of Employer	Occupation	
The University Of Texas Md Anderson Ca	Scientist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	1045.00
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 1692 OF 2648
	<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)
EMILY's List

A. Donald Treiman
Full Name (Last, First, Middle Initial)
Mailing Address 2006 Stradella Road
City Los Angeles State CA Zip Code 90077
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
None Retired
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233702
Amount of Each Receipt this Period
25.00

B. Ms. Inez K. Tremain
Full Name (Last, First, Middle Initial)
Mailing Address 1660 N La Salle Dr Apt 1212
City Chicago State IL Zip Code 60614
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
tishler andward ltd Attorney
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt
12 / 29 / 2014
Transaction ID : 4242530
Amount of Each Receipt this Period
100.00

C. Ms. Phyllis Tribble
Full Name (Last, First, Middle Initial)
Mailing Address 549 W 123rd St Apt 21c
City New York State NY Zip Code 10027
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Union Theological Seminary Professor
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
550.00

Date of Receipt
12 / 29 / 2014
Transaction ID : 4242529
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 1693 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Nancy Trick

Mailing Address 297 Graytwig Circle

City Murrells Inlet State SC Zip Code 29576

FEC ID number of contributing federal political committee. **C**

Name of Employer Thepeninsula Group Llc Occupation Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4227601

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
B. Ms. Carol Triebel

Mailing Address 2829 Nottingham St.

City Houston State TX Zip Code 77005

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240883

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
C. Ms. Maryellen Trimble

Mailing Address 1301 Nottingham Rd., Apt. B100

City Jamesville State NY Zip Code 13078

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

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
 12 / 01 / 2014
Transaction ID : 4230850

Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1375.00

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 1694 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jean Trinder
 Full Name (Last, First, Middle Initial)
 Mailing Address 29304 Spruce Canyon Dr
 City Golden State CO Zip Code 80403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230054
 Amount of Each Receipt this Period
 15.00

B. Jean Trinder
 Full Name (Last, First, Middle Initial)
 Mailing Address 29304 Spruce Canyon Dr
 City Golden State CO Zip Code 80403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237707
 Amount of Each Receipt this Period
 15.00

C. Jean Trinder
 Full Name (Last, First, Middle Initial)
 Mailing Address 29304 Spruce Canyon Dr
 City Golden State CO Zip Code 80403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240663
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 1695 OF 2648
	<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)
EMILY's List

A. Ms. Lynnette Tripp
Full Name (Last, First, Middle Initial)

Mailing Address 203 Magnolia Ave

City Modesto State CA Zip Code 95354

FEC ID number of contributing federal political committee. **C**

Name of Employer Sutter Gould Behavioral Health Occupation Np

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232517

Amount of Each Receipt this Period
20.00

B. Ms. Judith Troestler
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 370306

City Milwaukee State WI Zip Code 53237

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1035.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235921

Amount of Each Receipt this Period
5.00

C. Ms. Judith Troestler
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 370306

City Milwaukee State WI Zip Code 53237

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1035.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4239014

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional)..... **30.00**

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 1696 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith Troestler			Date of Receipt
Mailing Address PO Box 370306			<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4229374
Milwaukee	WI	53237	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
None	None		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1035.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Judith Troestler			Date of Receipt
Mailing Address PO Box 370306			<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4229375
Milwaukee	WI	53237	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
None	None		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1035.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Judith Troestler			Date of Receipt
Mailing Address PO Box 370306			<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4241577
Milwaukee	WI	53237	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
None	None		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1035.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1697 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Judith Troestler
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 370306
 City Milwaukee State WI Zip Code 53237
 Date of Receipt: 12 / 28 / 2014
Transaction ID : 4242379
 Amount of Each Receipt this Period: 10.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: None Occupation: None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 1035.00

B. Ms. Judith Troestler
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 370306
 City Milwaukee State WI Zip Code 53237
 Date of Receipt: 12 / 19 / 2014
Transaction ID : 4239013
 Amount of Each Receipt this Period: 15.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: None Occupation: None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 1035.00

C. Ms. Judith Troestler
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 370306
 City Milwaukee State WI Zip Code 53237
 Date of Receipt: 12 / 12 / 2014
Transaction ID : 4235773
 Amount of Each Receipt this Period: 25.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: None Occupation: None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 1035.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 1698 OF 2648
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith Troestler		Date of Receipt
Mailing Address PO Box 370306		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Milwaukee	WI	53237
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4239015
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1035.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Judith Troestler		Date of Receipt
Mailing Address PO Box 370306		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Milwaukee	WI	53237
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4239012
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1035.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Mary L. Tromly		Date of Receipt
Mailing Address PO Box 5023		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Missoula	MT	59806
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4234777
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="38.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="313.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="163.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1699 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Allan Troxler		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 16 / 2014
Mailing Address 1214 Broad St. Apt.2		Transaction ID : 4237095
City Durham	State NC	Zip Code 27705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Self	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) B. Ms. Malinda Troy		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 29 / 2014
Mailing Address 3722 Colonial Ave		Transaction ID : 4242454
City Los Angeles	State CA	Zip Code 90066
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.00
Name of Employer Requested	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) C. Ms. Roberta Truax		Date of Receipt M M M / D D D / Y Y Y Y Y 11 / 28 / 2014
Mailing Address 558 Howell Avenue		Transaction ID : 4229376
City Cincinnati	State OH	Zip Code 45220
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Was University Of Cincinnati	Occupation Professor Emeritax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	97.00
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 1700 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Roberta Truax		Date of Receipt
Mailing Address 558 Howell Avenue		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cincinnati	OH	45220
FEC ID number of contributing federal political committee.		Transaction ID : 4242380
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Was University Of Cincinnati	Professor Emeritax	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. David Truscott		Date of Receipt
Mailing Address 10 Orchard St		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Delhi	NY	13753
FEC ID number of contributing federal political committee.		Transaction ID : 4234611
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="245.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Jo Denton Tuck		Date of Receipt
Mailing Address 4242 Lomo Alto Dr. #S-28		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Dallas	TX	75219
FEC ID number of contributing federal political committee.		Transaction ID : 4231247
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1701 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Deborah D. Tucker		Date of Receipt
Mailing Address 4612 Shoal Creek Blvd		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
Austin	TX	78756
FEC ID number of contributing federal political committee.		Transaction ID : 4239129
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
National Center On Domestic And Sexual	Executive Director, Www.Ncdsv.Org, Con	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="395.16"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Lindsey S. Tucker		Date of Receipt
Mailing Address 8735 S.W. 54th Ter.		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Miami	FL	33165
FEC ID number of contributing federal political committee.		Transaction ID : 4231248
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="582.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Patricia E. Tucker-Dolan		Date of Receipt
Mailing Address 13525 - 181st Ave SE		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Renton	WA	98059
FEC ID number of contributing federal political committee.		Transaction ID : 4234566
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="270.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="170.00"/>
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 1702 OF 2648
	(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)
EMILY's List

A. Lois Tully
Full Name (Last, First, Middle Initial)

Mailing Address 2540 Massachusetts Ave NW # 306

City Washington	State DC	Zip Code 20008
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Federal Government	Occupation Program Officer
--	-------------------------------

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
12	/	17	/	2014

Transaction ID : 4237538

Amount of Each Receipt this Period

50.00

B. Mr. John J. Tupper
Full Name (Last, First, Middle Initial)

Mailing Address 181 Middle Rd

City Byfield	State MA	Zip Code 01922
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2014

Transaction ID : 4235289

Amount of Each Receipt this Period

50.00

C. Ms. Linda Turner
Full Name (Last, First, Middle Initial)

Mailing Address 1330 Quail Hollow Rd

City Ben Lomond	State CA	Zip Code 95005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

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
12	/	09	/	2014

Transaction ID : 4234088

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 1703 OF 2648
	<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)
EMILY's List

A. Ms. Mary L. Turner
Full Name (Last, First, Middle Initial)
Mailing Address 945 Lawton St
City San Francisco State CA Zip Code 94122
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 ▼ 1504.00

Date of Receipt 12 / 05 / 2014
Transaction ID : 4232943
Amount of Each Receipt this Period 188.00

B. Steve Turner
Full Name (Last, First, Middle Initial)
Mailing Address P. O. Box 92380
City Anchorage State AK Zip Code 99509
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Real Estate Appraiser
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 19 / 2014
Transaction ID : 4239019
Amount of Each Receipt this Period 25.00

C. Chris Turner
Full Name (Last, First, Middle Initial)
Mailing Address 600 Bridlespur Lane
City Earlysville State VA Zip Code 22936
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Writer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 20 / 2014
Transaction ID : 4239106
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional).....▶ 263.00
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 1704 OF 2648
	<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)
EMILY's List

A. Ms. Mary Jane Turner
 Full Name (Last, First, Middle Initial)
 Mailing Address 4700 Oakhurst Blvd., Apt. 320
 City Harrisburg State PA Zip Code 17110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 313.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227447
 Amount of Each Receipt this Period
 188.00

B. Rhya B. Turovsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 1460 Washburn Rd
 City Pasadena State CA Zip Code 91105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233636
 Amount of Each Receipt this Period
 15.00

C. Ms. Genevieve M. Tvrdik
 Full Name (Last, First, Middle Initial)
 Mailing Address 341 Stehman Rd
 City Lancaster State PA Zip Code 17603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : 4232197
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	303.00
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 1705 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anne S. Twitchell		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234299
Mailing Address 8580 Woodway Dr Apt 1205		Amount of Each Receipt this Period 1000.00
City Houston	State TX	Zip Code 77063
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 ▼ 3200.00	

Full Name (Last, First, Middle Initial) B. Ms. Anne S. Twitchell		Date of Receipt M M / D D / Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227612
Mailing Address 8580 Woodway Dr Apt 1205		Amount of Each Receipt this Period 1200.00
City Houston	State TX	Zip Code 77063
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 ▼ 3200.00	

Full Name (Last, First, Middle Initial) C. Anton Tyler		Date of Receipt M M / D D / Y Y Y Y 11 / 25 / 2014 Transaction ID : 4230090
Mailing Address 631 Spritlake Ct		Amount of Each Receipt this Period 20.00
City N. Las Vegas	State NV	Zip Code 89032
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 483.00	

SUBTOTAL of Receipts This Page (optional).....▶	2220.00
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 1706 OF 2648
	(check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Anton Tyler		Date of Receipt M M / D D / Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240720
Mailing Address 631 Spritlake Ct		Amount of Each Receipt this Period 170.00
City N. Las Vegas	State NV	Zip Code 89032
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 483.00	

Full Name (Last, First, Middle Initial) B. Dr. Carl W. Tyler		Date of Receipt M M / D D / Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227367
Mailing Address 2446 Sunset Dr NE		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30345
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 ▼ 1460.00	

Full Name (Last, First, Middle Initial) C. Dr. Carl W. Tyler		Date of Receipt M M / D D / Y Y Y Y Y 12 / 11 / 2014 Transaction ID : 4234670
Mailing Address 2446 Sunset Dr NE		Amount of Each Receipt this Period 100.00
City Atlanta	State GA	Zip Code 30345
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 ▼ 1460.00	

SUBTOTAL of Receipts This Page (optional).....▶	170.00
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 1708 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Berlinda Tyler-Jamison			Date of Receipt
Mailing Address 2427 9th Street			<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4236025
Rock Island	IL	61201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="300.00"/>
Name of Employer	Occupation		
Trinity Regional Health System	Healthcare Vice-President		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="360.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Marlena Tyre			Date of Receipt
Mailing Address 3630 S. Hopper Ridge road			<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4235054
Cincinnati	OH	45255	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="10.00"/>
Name of Employer	Occupation		
None	Retired		
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. Ms. Marianne Udow-Phillips			Date of Receipt
Mailing Address 2280 Gale Rd			<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4242435
Ann Arbor	MI	48105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="250.00"/>
Name of Employer	Occupation		
Univ Of Michigan	Director Of Center For Hea		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="290.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1709 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Clarissa C. Uerling		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229380	
Mailing Address 2901 Enid St.		Amount of Each Receipt this Period 30.00	
City Fort Smith	State AR	Zip Code 72901	
FEC ID number of contributing federal political committee. C			
Name of Employer Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Requested Aggregate Year-to-Date ▼ 445.00		

Full Name (Last, First, Middle Initial) B. Ms. Clarissa C. Uerling		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242384	
Mailing Address 2901 Enid St.		Amount of Each Receipt this Period 30.00	
City Fort Smith	State AR	Zip Code 72901	
FEC ID number of contributing federal political committee. C			
Name of Employer Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Requested Aggregate Year-to-Date ▼ 445.00		

Full Name (Last, First, Middle Initial) C. Mr. James S. Uleman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227608	
Mailing Address 51 Roosevelt St.		Amount of Each Receipt this Period 200.00	
City Pearl River	State NY	Zip Code 10965	
FEC ID number of contributing federal political committee. C			
Name of Employer Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Requested Professor Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional).....▶	260.00
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 1710 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Anthony Ulinski
 Full Name (Last, First, Middle Initial)
 Mailing Address 1117 Marshall St
 City Raleigh State NC Zip Code 27604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Artist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233668
 Amount of Each Receipt this Period
 25.00

B. Jenny Ohara Ullett
 Full Name (Last, First, Middle Initial)
 Mailing Address 8663 Wonderland Avenue
 City Los Angeles State CA Zip Code 90046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Actor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229675
 Amount of Each Receipt this Period
 25.00

c. Jenny Ohara Ullett
 Full Name (Last, First, Middle Initial)
 Mailing Address 8663 Wonderland Avenue
 City Los Angeles State CA Zip Code 90046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Actor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240178
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....	75.00
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 1711 OF 2648
	<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)
EMILY's List

A. Jenny Ohara Ullett
Full Name (Last, First, Middle Initial)

Mailing Address 8663 Wonderland Avenue

City Los Angeles State CA Zip Code 90046

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Actor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2014

Transaction ID : 4238057

Amount of Each Receipt this Period
 35.00

B. Mr. Howard Ulstein
Full Name (Last, First, Middle Initial)

Mailing Address 8201 SW 24th St

City North Lauderdale State FL Zip Code 33068

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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014

Transaction ID : 4231249

Amount of Each Receipt this Period
 100.00

C. Ms. Margaret A Underwood
Full Name (Last, First, Middle Initial)

Mailing Address 1776 Marlbrook Dr NE

City Atlanta State GA Zip Code 30307

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 815.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4241579

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 1712 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margaret A Underwood
 Full Name (Last, First, Middle Initial)
 Mailing Address 1776 Marlbrook Dr NE
 City Atlanta State GA Zip Code 30307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 815.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242820
 Amount of Each Receipt this Period
 15.00

B. Ms. Margaret A Underwood
 Full Name (Last, First, Middle Initial)
 Mailing Address 1776 Marlbrook Dr NE
 City Atlanta State GA Zip Code 30307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 815.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242849
 Amount of Each Receipt this Period
 15.00

C. Ms. Margaret A Underwood
 Full Name (Last, First, Middle Initial)
 Mailing Address 1776 Marlbrook Dr NE
 City Atlanta State GA Zip Code 30307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 815.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242850
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 1713 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margaret A Underwood
 Full Name (Last, First, Middle Initial)
 Mailing Address 1776 Marlbrook Dr NE
 City Atlanta State GA Zip Code 30307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 815.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239220
 Amount of Each Receipt this Period
 25.00

B. Ms. Margaret A Underwood
 Full Name (Last, First, Middle Initial)
 Mailing Address 1776 Marlbrook Dr NE
 City Atlanta State GA Zip Code 30307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 815.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2014
Transaction ID : 4239370
 Amount of Each Receipt this Period
 25.00

C. Ms. Margaret A Underwood
 Full Name (Last, First, Middle Initial)
 Mailing Address 1776 Marlbrook Dr NE
 City Atlanta State GA Zip Code 30307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 815.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241578
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 1714 OF 2648
	<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)
EMILY's List

A. Shalini Uppu
Full Name (Last, First, Middle Initial)

Mailing Address 420 Catherine St Apt 10

City Walla Walla State WA Zip Code 99362

FEC ID number of contributing federal political committee. **C**

Name of Employer Whitman College Occupation College Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014

Transaction ID : 4232884

Amount of Each Receipt this Period
50.00

B. Selest N. Upshaw
Full Name (Last, First, Middle Initial)

Mailing Address 3690 Darbytown Rd

City Henrico State VA Zip Code 23231

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4230115

Amount of Each Receipt this Period
30.00

C. Selest N. Upshaw
Full Name (Last, First, Middle Initial)

Mailing Address 3690 Darbytown Rd

City Henrico State VA Zip Code 23231

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014

Transaction ID : 4240745

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **110.00**

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 1715 OF 2648
	<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)
EMILY's List

A. Marilee Urban
Full Name (Last, First, Middle Initial)
Mailing Address 70490 Simonson Lane
City Elgin State OR Zip Code 97827
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **12 / 31 / 2014**
Transaction ID : 4243310
Amount of Each Receipt this Period **200.00**

B. Ms. Ella R. Urdang
Full Name (Last, First, Middle Initial)
Mailing Address 461 Tenafly Rd.
City Englewood State NJ Zip Code 07631
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 15 / 2014**
Transaction ID : 4236443
Amount of Each Receipt this Period **100.00**

C. Melissa Urofsky
Full Name (Last, First, Middle Initial)
Mailing Address 4710 Glenbrook Pkwy
City Bethesda State MD Zip Code 20814
FEC ID number of contributing federal political committee. **C**
Name of Employer Husband Occupation Housewife
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **2050.00**

Date of Receipt **12 / 03 / 2014**
Transaction ID : 4231960
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **220.00**
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 1716 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Melissa Urofsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 4710 Glenbrook Pkwy
 City Bethesda State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Husband Occupation Housewife
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2050.00**

Date of Receipt
 12 / 31 / 2014
Transaction ID : 4243441
 Amount of Each Receipt this Period
1000.00

B. Barbara Vaccaro
 Full Name (Last, First, Middle Initial)
 Mailing Address 720 N. Taylor Avenue
 City Oak Park State IL Zip Code 60302
 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 **350.00**

Date of Receipt
 12 / 05 / 2014
Transaction ID : 4232737
 Amount of Each Receipt this Period
25.00

C. Ms. Debra Vajcner
 Full Name (Last, First, Middle Initial)
 Mailing Address 24381 Los Serranos Drive
 City Laguna Niguel State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Licensed Marriage an
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **375.00**

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231250
 Amount of Each Receipt this Period
375.00

SUBTOTAL of Receipts This Page (optional).....	1400.00
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 1717 OF 2648
	<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)
EMILY's List

A. Ms. Pamela Van Der Meulen
Full Name (Last, First, Middle Initial)
Mailing Address 80 East End Avenue, #19-B

City New York	State NY	Zip Code 10028
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Nylag	Occupation Attorney
---------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4229385

Amount of Each Receipt this Period

2014	15.00
------	-------

B. Ms. Pamela Van Der Meulen
Full Name (Last, First, Middle Initial)
Mailing Address 80 East End Avenue, #19-B

City New York	State NY	Zip Code 10028
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Nylag	Occupation Attorney
---------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2014

Transaction ID : 4243470

Amount of Each Receipt this Period

2014	22.00
------	-------

C. Ms. Jacqueline H. van Gorkom
Full Name (Last, First, Middle Initial)
Mailing Address 456 Riverside Drive, Apt 7B

City New York	State NY	Zip Code 10027
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Columbia University	Occupation Professor Of Astronomy
---	--------------------------------------

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
12	/	15	/	2014

Transaction ID : 4236882

Amount of Each Receipt this Period

2014	250.00
------	--------

SUBTOTAL of Receipts This Page (optional).....▶	287.00
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 1718 OF 2648
	<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)
EMILY's List

A. Joan Van Horn
Full Name (Last, First, Middle Initial)

Mailing Address 2679 Mountain Gate Way

City	State	Zip Code
Oakland	CA	94611

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 ▼
201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2014

Transaction ID : 4243374

Amount of Each Receipt this Period
56.00

B. Ms. Helen Van Prooyen
Full Name (Last, First, Middle Initial)

Mailing Address 4401 W. Gallistel Road

City	State	Zip Code
Park Falls	WI	54552

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4229387

Amount of Each Receipt this Period
10.00

C. Ms. Helen Van Prooyen
Full Name (Last, First, Middle Initial)

Mailing Address 4401 W. Gallistel Road

City	State	Zip Code
Park Falls	WI	54552

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
None	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241580

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	76.00
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 1719 OF 2648
	<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)
EMILY's List

A. Ms. Helen Van Prooyen
Full Name (Last, First, Middle Initial)
Mailing Address 4401 W. Gallistel Road
City Park Falls State WI Zip Code 54552
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 ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 30 / 2014
Transaction ID : 4229575
Amount of Each Receipt this Period
15.00

B. Ms. Helen Van Prooyen
Full Name (Last, First, Middle Initial)
Mailing Address 4401 W. Gallistel Road
City Park Falls State WI Zip Code 54552
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 ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241778
Amount of Each Receipt this Period
15.00

C. William W. Van Stone
Full Name (Last, First, Middle Initial)
Mailing Address 625 Burnham Road
City Philadelphia State PA Zip Code 19119
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 ▼ 910.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : 4232929
Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
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 1720 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Robert Van Wyck		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4239021
Mailing Address 34807 N 32nd Dr Apt 2069		Amount of Each Receipt this Period 15.00
City Phoenix	State AZ	Zip Code 85086
FEC ID number of contributing federal political committee. C		
Name of Employer Van Wyck Law Firm	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Mr. Howard VanBreeman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2014 Transaction ID : 4242672
Mailing Address 511 Elberta Ave.		Amount of Each Receipt this Period 75.00
City Salisbury	State MD	Zip Code 21801
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 ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Kathryn Vandenberg		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4234172
Mailing Address 2754 Summit Ave.		Amount of Each Receipt this Period 35.00
City Highland Park	State IL	Zip Code 60035
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 1721 OF 2648
	<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)
EMILY's List

A. Ms. Barbara Vanderkolk Gardner
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 North Warbler Lane
 City Sarasota State FL Zip Code 34236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Collins Interiors, Llc Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231661
 Amount of Each Receipt this Period
 10.00

B. Mr. Martin Vanderlaan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1626 14th Ave
 City San Francisco State CA Zip Code 94122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Genentech Occupation Scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4235151
 Amount of Each Receipt this Period
 100.00

C. Johanna Vandermolen
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 Vista Clara Rd
 City Sausalito State CA Zip Code 94965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234993
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 1722 OF 2648
	<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)
EMILY's List

A. Johanna Vandermolen
Full Name (Last, First, Middle Initial)

Mailing Address 37 Vista Clara Rd

City Sausalito State CA Zip Code 94965

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **730.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014

Transaction ID : 4235776

Amount of Each Receipt this Period
400.00

B. Ms. Jane Vandeventer
Full Name (Last, First, Middle Initial)

Mailing Address 101 Fox Hunt Pt.

City Nashville State TN Zip Code 37221

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 ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4236982

Amount of Each Receipt this Period
300.00

C. Ms. Marjorie E. Vanek
Full Name (Last, First, Middle Initial)

Mailing Address 10241 York Rd.

City North Royalton State OH Zip Code 44133

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 ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : 4243208

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	440.00
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 1723 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margaret E. Vangundy
 Full Name (Last, First, Middle Initial)
 Mailing Address 7719n Arnold Rd
 City Columbia City State IN Zip Code 46725
 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 ▼ 935.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229389
 Amount of Each Receipt this Period
 85.00

B. Ms. Margaret E. Vangundy
 Full Name (Last, First, Middle Initial)
 Mailing Address 7719n Arnold Rd
 City Columbia City State IN Zip Code 46725
 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 ▼ 935.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241762
 Amount of Each Receipt this Period
 85.00

C. Ms. Andrea Vanhouweling
 Full Name (Last, First, Middle Initial)
 Mailing Address 920 Lincoln Avenue
 City Ann Arbor State MI Zip Code 48104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232413
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00
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 1724 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Carlene A. Vanvoorhies
 Full Name (Last, First, Middle Initial)
 Mailing Address 365 N. Berkshire Road
 City Bloomfield Hills State MI Zip Code 48302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228169
 Amount of Each Receipt this Period
 25.00

B. Ms. Carlene A. Vanvoorhies
 Full Name (Last, First, Middle Initial)
 Mailing Address 365 N. Berkshire Road
 City Bloomfield Hills State MI Zip Code 48302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232445
 Amount of Each Receipt this Period
 25.00

C. Ms. Carlene A. Vanvoorhies
 Full Name (Last, First, Middle Initial)
 Mailing Address 365 N. Berkshire Road
 City Bloomfield Hills State MI Zip Code 48302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241583
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 1725 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Arabia Vargas
 Full Name (Last, First, Middle Initial)
 Mailing Address 315 Pueblo Pintado
 City Helotes State TX Zip Code 78023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Attorney
 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
 12 / 15 / 2014
Transaction ID : 4236547
 Amount of Each Receipt this Period
375.00

B. Dr. Karin Vargervik
 Full Name (Last, First, Middle Initial)
 Mailing Address 332 Willow Ave
 City Corte Madera State CA Zip Code 94925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Orthodontist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230857
 Amount of Each Receipt this Period
200.00

C. Ms. Karen L. VarnHagen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1129 Douglass St.
 City San Francisco State CA Zip Code 94131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Stockbroker
 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
 12 / 08 / 2014
Transaction ID : 4233055
 Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....	675.00
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 1726 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Sharon Varnum
 Full Name (Last, First, Middle Initial)
 Mailing Address 1708 Drury Lane
 City Nichols Hills State OK Zip Code 73116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Mental Health Counselor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 12 / 23 / 2014
Transaction ID : 4240181
 Amount of Each Receipt this Period
 50.00

B. Ms. Patricia Varone
 Full Name (Last, First, Middle Initial)
 Mailing Address 1510 SW 110 Way
 City Davie State FL Zip Code 33324
 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 ▼ 400.00

Date of Receipt
 12 / 17 / 2014
Transaction ID : 4237787
 Amount of Each Receipt this Period
 35.00

C. Mrs. Mary C. Vassallo
 Full Name (Last, First, Middle Initial)
 Mailing Address 81 Greenmount Ter
 City Waterbury State CT Zip Code 06708
 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 ▼ 700.00

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231458
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
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 1727 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Paul Vasser		Date of Receipt 12 / 20 / 2014 Transaction ID : 4239259
Mailing Address PO Box 1485		Amount of Each Receipt this Period 10.00
City Grass Valley	State CA	Zip Code 95945
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 430.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	

Full Name (Last, First, Middle Initial) B. Paul Vasser		Date of Receipt 12 / 20 / 2014 Transaction ID : 4239260
Mailing Address PO Box 1485		Amount of Each Receipt this Period 20.00
City Grass Valley	State CA	Zip Code 95945
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 430.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	

Full Name (Last, First, Middle Initial) C. Ms. Victoria R. Vaughan		Date of Receipt 11 / 25 / 2014 Transaction ID : 4230108
Mailing Address 1014 W. Nicolet St.		Amount of Each Receipt this Period 20.00
City Banning	State CA	Zip Code 92220
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 928.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 928.00	

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 1728 OF 2648
	<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)
EMILY's List

A. Ms. Victoria R. Vaughan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1014 W. Nicolet St.
 City Banning State CA Zip Code 92220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 928.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240734
 Amount of Each Receipt this Period
 20.00

B. Ms. Victoria R. Vaughan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1014 W. Nicolet St.
 City Banning State CA Zip Code 92220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 928.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237537
 Amount of Each Receipt this Period
 38.00

C. Mr. Donald Vaught
 Full Name (Last, First, Middle Initial)
 Mailing Address 2114 S Cedar Hills DR
 City Mount Vernon State WA Zip Code 98274
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240351
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	108.00
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 1729 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Janet Veasey
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 Joy Street
 23 Joy Street
 City Boston State MA Zip Code 02114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235834
 Amount of Each Receipt this Period
 15.00

B. Ms. Janet Veasey
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 Joy Street
 23 Joy Street
 City Boston State MA Zip Code 02114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : 4235833
 Amount of Each Receipt this Period
 20.00

C. Ms. Karen S. Vecellio
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 Rothermel Avenue
 City Kinderhook State NY Zip Code 12106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ichabod Crane Occupation Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4244842
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 1730 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Danielle Veith		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243294
Mailing Address 7006 Poplar Avenue		Amount of Each Receipt this Period 200.00
City Takoma Park	State MD	Zip Code 20912
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Full Name (Last, First, Middle Initial) B. Ms. Diana Velis		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2014 Transaction ID : 4235460
Mailing Address 1516 Darling St.		Amount of Each Receipt this Period 30.00
City Ogden	State UT	Zip Code 84403
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) C. Rama Vemulapalli		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229391
Mailing Address 2206 Yardley Place		Amount of Each Receipt this Period 25.00
City Whippany	State NJ	Zip Code 07981
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	255.00
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 1731 OF 2648
	<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)
EMILY's List

A. Rama Vemulapalli
Full Name (Last, First, Middle Initial)
Mailing Address 2206 Yardley Place

City Whippany	State NJ	Zip Code 07981
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

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
12	/	28	/	2014

Transaction ID : 4241584

Amount of Each Receipt this Period
25.00

B. Iris C. Veomett
Full Name (Last, First, Middle Initial)
Mailing Address 2202 E Hampton St.

City Tucson	State AZ	Zip Code 85719
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	15	/	2014

Transaction ID : 4236669

Amount of Each Receipt this Period
15.00

C. Ms. Lisa S. Verner
Full Name (Last, First, Middle Initial)
Mailing Address 815 W. Armour Street

City Seattle	State WA	Zip Code 98119
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Consultant
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4240182

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 1732 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Lt. Col. Houston W. Vernon
 Full Name (Last, First, Middle Initial)
 Mailing Address 3710 S Goldfield Rd Lot 290
 City State Zip Code
 Apache Junction AZ 85119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4227438
 Amount of Each Receipt this Period
 100.00

B. Brenton Verploeg
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 SE Second Street
 City State Zip Code
 Miami FL 33131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Verploeg & Lumpkin, Pa Attorney
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4244896
 Amount of Each Receipt this Period
 20.00

C. Ms. Joanne M. Veto
 Full Name (Last, First, Middle Initial)
 Mailing Address 1390 Kenyon St NW Apt 728
 City State Zip Code
 Washington DC 20010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Accenture Int'l Public Relations
 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
 12 / 01 / 2014
Transaction ID : 4230860
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	270.00
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 1733 OF 2648
	<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)
EMILY's List

A. Ms. Janet Vickers
Full Name (Last, First, Middle Initial)
Mailing Address 235 Country Club Drive
City Reno State NV Zip Code 89509
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4240183
Amount of Each Receipt this Period
50.00

B. Harold Vickery
Full Name (Last, First, Middle Initial)
Mailing Address 2404 Westline Dr.
City Joliet State IL Zip Code 60431
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 ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 29 / 2014
Transaction ID : 4229471
Amount of Each Receipt this Period
100.00

C. Dr. Judy Vickrey
Full Name (Last, First, Middle Initial)
Mailing Address 1700sunrise
City Warrensburg State MO Zip Code 64093
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 ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 22 / 2014
Transaction ID : 4239528
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 1734 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Janice M. Victor
 Full Name (Last, First, Middle Initial)
 Mailing Address 530 Valley Rd Apt 3f
 City Montclair State NJ Zip Code 07043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Citizens Unified Occupation Myob
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 564.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : 4238291
 Amount of Each Receipt this Period
 188.00

B. Ms. Anne Vidaver
 Full Name (Last, First, Middle Initial)
 Mailing Address 2416 Sewell St.
 City Lincoln State NE Zip Code 68502
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : 4242485
 Amount of Each Receipt this Period
 125.00

C. Thomas Vietorisz
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Washington Square Village Apt. 8-M
 City New York State NY Zip Code 10012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241586
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional).....▶	388.00
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 1735 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Thomas Vietorisz
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Washington Square Village
 Apt. 8-M
 City New York State NY Zip Code 10012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229395
 Amount of Each Receipt this Period
 100.00

B. Loral Vigliotti
 Full Name (Last, First, Middle Initial)
 Mailing Address 40940 Magnolia Dr E
 City Clinton Township State MI Zip Code 48038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kemp Klein Law Firm Occupation Legal Secretary
 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
 12 / 29 / 2014
Transaction ID : 4242808
 Amount of Each Receipt this Period
 10.00

C. Michaela Vilhotti
 Full Name (Last, First, Middle Initial)
 Mailing Address 246 Virginia Ave
 City Fort Lee State NJ Zip Code 07024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Educ. Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231631
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 1736 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Michaela Vilhotti
 Full Name (Last, First, Middle Initial)
 Mailing Address 246 Virginia Ave
 City Fort Lee State NJ Zip Code 07024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Educ. Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236363
 Amount of Each Receipt this Period
 10.00

B. Gina Villa
 Full Name (Last, First, Middle Initial)
 Mailing Address 290 West Street
 City Milford State MA Zip Code 01757
 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 ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236184
 Amount of Each Receipt this Period
 15.00

C. Steven Vince
 Full Name (Last, First, Middle Initial)
 Mailing Address 5505 Oak Lane
 City Ames State IA Zip Code 50014
 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 ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228172
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 1737 OF 2648
	<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)
EMILY's List

A. Steven Vince
Full Name (Last, First, Middle Initial)

Mailing Address 5505 Oak Lane

City Ames State IA Zip Code 50014

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 ▼ **625.00**

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240830

Amount of Each Receipt this Period
50.00

B. Ms. Doris Vinnedge
Full Name (Last, First, Middle Initial)

Mailing Address 202 Taylor Ave. S.

City North Bend State WA Zip Code 98045

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **293.00**

Date of Receipt
12 / 19 / 2014
Transaction ID : 4239025

Amount of Each Receipt this Period
20.00

C. Ms. Bernice B. Visser
Full Name (Last, First, Middle Initial)

Mailing Address 14564 Chris Dr

City N Huntingdon State PA Zip Code 15642

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
11 / 28 / 2014
Transaction ID : 4229398

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... **105.00**

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 1738 OF 2648
	<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)
EMILY's List

A. Ms. Bernice B. Visser
 Full Name (Last, First, Middle Initial)
 Mailing Address 14564 Chris Dr
 City N Huntingdon State PA Zip Code 15642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242389
 Amount of Each Receipt this Period
 35.00

B. Ms. Donna Vocate
 Full Name (Last, First, Middle Initial)
 Mailing Address 2116 S Ogden St
 City Denver State CO Zip Code 80210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4239581
 Amount of Each Receipt this Period
 100.00

C. Ms. Estelle Voelker
 Full Name (Last, First, Middle Initial)
 Mailing Address 5664 Adobe Falls Place
 City San Diego State CA Zip Code 92120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236364
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1739 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Judith Voet
Full Name (Last, First, Middle Initial)
Mailing Address 9 Tanglewood Circle

City Rose Valley	State PA	Zip Code 19086
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

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
 12 / 29 / 2014
Transaction ID : 4242876

Amount of Each Receipt this Period
350.00

B. Ms. Ruth Vogel
Full Name (Last, First, Middle Initial)
Mailing Address 818 NW 53rd St.

City Seattle	State WA	Zip Code 98107
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	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
 12 / 03 / 2014
Transaction ID : 4232063

Amount of Each Receipt this Period
25.00

C. Winifred Vogt
Full Name (Last, First, Middle Initial)
Mailing Address 404 Kipling Rd

City Dummerston	State VT	Zip Code 05301
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229765

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 1740 OF 2648
	<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

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)
EMILY's List

A. Ms. Grace L. Volckhausen
Full Name (Last, First, Middle Initial)

Mailing Address 262 President St

City Brooklyn State NY Zip Code 11231

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

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
 12 / 01 / 2014

Transaction ID : 4230864

Amount of Each Receipt this Period
 125.00

B. Randall Volkert
Full Name (Last, First, Middle Initial)

Mailing Address 70 Lavalley Ave

City Chicopee State MA Zip Code 01020

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014

Transaction ID : 4239341

Amount of Each Receipt this Period
 10.00

C. Ms. Mary Jo Von Bieberstein
Full Name (Last, First, Middle Initial)

Mailing Address 479 County Route 9

City Ghent State NY Zip Code 12075

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014

Transaction ID : 4236703

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶ 160.00

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 1741 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda Voss		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2014 Transaction ID : 4239165
Mailing Address 1303 N Ode St Apt 224		Amount of Each Receipt this Period 150.00
City Arlington	State VA	Zip Code 22209
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1875.00	

Full Name (Last, First, Middle Initial) B. Ms. Nancy Voss		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229400
Mailing Address 5825 Spilman Avenue		Amount of Each Receipt this Period 20.00
City Sacramento	State CA	Zip Code 95819
FEC ID number of contributing federal political committee. C		
Name of Employer State Of California	Occupation Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Ms. Nancy Voss		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242392
Mailing Address 5825 Spilman Avenue		Amount of Each Receipt this Period 20.00
City Sacramento	State CA	Zip Code 95819
FEC ID number of contributing federal political committee. C		
Name of Employer State Of California	Occupation Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	190.00
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 1742 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Elaine V. Voss
 Full Name (Last, First, Middle Initial)
 Mailing Address 16866 89th PI N
 City State Zip Code
 Maple Grove MN 55311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229399
 Amount of Each Receipt this Period
 30.00

B. Ms. Elaine V. Voss
 Full Name (Last, First, Middle Initial)
 Mailing Address 16866 89th PI N
 City State Zip Code
 Maple Grove MN 55311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242391
 Amount of Each Receipt this Period
 30.00

C. Geraldine M. Votava
 Full Name (Last, First, Middle Initial)
 Mailing Address 958 La Costa
 City State Zip Code
 Bartlett IL 60103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 None Unemployed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229401
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 1743 OF 2648
	<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)
EMILY's List

A. Geraldine M. Votava
Full Name (Last, First, Middle Initial)

Mailing Address 958 La Costa

City Bartlett State IL Zip Code 60103

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Unemployed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4242393

Amount of Each Receipt this Period
300.00

B. Ms. Cameron Mc Vowell
Full Name (Last, First, Middle Initial)

Mailing Address 2625 Crest Road

City Birmingham State AL Zip Code 35223

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Volunteer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014

Transaction ID : 4233783

Amount of Each Receipt this Period
1000.00

C. Ms. Emily Wachowiak
Full Name (Last, First, Middle Initial)

Mailing Address 1629 N Campbell Ave # 1f

City Chicago State IL Zip Code 60647

FEC ID number of contributing federal political committee. **C**

Name of Employer Groupon Occupation Editor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2014

Transaction ID : 4229550

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... **1040.00**

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 1744 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Emily Wachowiak
 Full Name (Last, First, Middle Initial)
 Mailing Address 1629 N Campbell Ave # 1f
 City Chicago State IL Zip Code 60647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Groupon Occupation Editor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232603
 Amount of Each Receipt this Period
 10.00

B. Ms. Emily Wachowiak
 Full Name (Last, First, Middle Initial)
 Mailing Address 1629 N Campbell Ave # 1f
 City Chicago State IL Zip Code 60647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Groupon Occupation Editor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241299
 Amount of Each Receipt this Period
 10.00

C. Ms. Betsy Wade
 Full Name (Last, First, Middle Initial)
 Mailing Address 255 West End Avneue
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 08 / 2014
Transaction ID : 4233089
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 1745 OF 2648
	<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)
EMILY's List

A. Sally Wadsworth
Full Name (Last, First, Middle Initial)
Mailing Address 469 Circle Drive

City Santa Fe	State NM	Zip Code 87501
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Artist/Designer
--------------------------	-------------------------------

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	/	27	/	2014

Transaction ID : 4228358

Amount of Each Receipt this Period
25.00

B. Sally Wadsworth
Full Name (Last, First, Middle Initial)
Mailing Address 469 Circle Drive

City Santa Fe	State NM	Zip Code 87501
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Artist/Designer
--------------------------	-------------------------------

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
12	/	27	/	2014

Transaction ID : 4241190

Amount of Each Receipt this Period
25.00

C. Ms. Irene C Wagner
Full Name (Last, First, Middle Initial)
Mailing Address 5225 Pooks Hill Road, 1101n

City Bethesda	State MD	Zip Code 20814
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

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	/	26	/	2014

Transaction ID : 4228174

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 1746 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Elizabeth Wahbe			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 27 / 2014 Transaction ID : 4228380
Mailing Address 616 Highland Drive			Amount of Each Receipt this Period 35.00
City Bellingham	State WA	Zip Code 98225	
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Mental Health Counselor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00		

Full Name (Last, First, Middle Initial) B. Elizabeth Wahbe			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2014 Transaction ID : 4241197
Mailing Address 616 Highland Drive			Amount of Each Receipt this Period 35.00
City Bellingham	State WA	Zip Code 98225	
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Mental Health Counselor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00		

Full Name (Last, First, Middle Initial) C. Harry Wainwright			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236740
Mailing Address 1111 Appalachian Blvd			Amount of Each Receipt this Period 100.00
City Arden	State NC	Zip Code 28704	
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation None		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

SUBTOTAL of Receipts This Page (optional).....▶	170.00
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 1747 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Harry Wainwright
 Full Name (Last, First, Middle Initial)
 Mailing Address 1111 Appalachian Blvd
 City Arden State NC Zip Code 28704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236840
 Amount of Each Receipt this Period
 100.00

B. Harry Wainwright
 Full Name (Last, First, Middle Initial)
 Mailing Address 1111 Appalachian Blvd
 City Arden State NC Zip Code 28704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236841
 Amount of Each Receipt this Period
 100.00

C. Harry Wainwright
 Full Name (Last, First, Middle Initial)
 Mailing Address 1111 Appalachian Blvd
 City Arden State NC Zip Code 28704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236842
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 1748 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Marcy Waldinger
 Full Name (Last, First, Middle Initial)
 Mailing Address 3228 West Dobson Place
 City Ann Arbor State MI Zip Code 48105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Michigan Cancer Center Occupation Cancer Center Administrator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240185
 Amount of Each Receipt this Period
150.00

B. Barbara Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 Quichas Hill Drive, #22
 PO Box 777
 City Ignacio State CO Zip Code 81137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ignacio School District Occupation Teacher - Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4239027
 Amount of Each Receipt this Period
10.00

C. Barbara Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 Quichas Hill Drive, #22
 PO Box 777
 City Ignacio State CO Zip Code 81137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ignacio School District Occupation Teacher - Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240188
 Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... **170.00**
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 1749 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Robert Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Brentwood Drive
 City Auburn State ME Zip Code 04210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Maine Education Association Executive Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231430
 Amount of Each Receipt this Period
 25.00

B. Ms. Stephanie A. Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 2720 Hogan Way
 City Canton State MI Zip Code 48188
 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 ▼
 280.00

Date of Receipt
 12 / 23 / 2014
Transaction ID : 4240186
 Amount of Each Receipt this Period
 50.00

C. Ms. Jacquelyn Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Joe Holt Way
 City Putney State VT Zip Code 05346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236698
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 1750 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ruth Walker		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014 Transaction ID : 4237804
Mailing Address 2208 Coventry Ln		Amount of Each Receipt this Period 50.00
City Cedar Falls	State IA	Zip Code 50613
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Ruth Walker		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241764
Mailing Address 2208 Coventry Ln		Amount of Each Receipt this Period 100.00
City Cedar Falls	State IA	Zip Code 50613
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. Dolores Walker		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 04 / 2014 Transaction ID : 4232251
Mailing Address 463 West St., Apt. 402		Amount of Each Receipt this Period 40.00
City New York	State NY	Zip Code 10014
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 ▼ 340.00	

SUBTOTAL of Receipts This Page (optional).....▶	190.00
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 1751 OF 2648
	<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	

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Leslie Walker			Date of Receipt
Mailing Address 23 Douglas Rd			<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4230141
Belmont	MA	02478	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
Prisoners' Legal Services	Lawyer		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Leslie Walker			Date of Receipt
Mailing Address 23 Douglas Rd			<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4240190
Belmont	MA	02478	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
Prisoners' Legal Services	Lawyer		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Elyn Walker			Date of Receipt
Mailing Address 20230 Heartwood Court			<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : 4230131
Hidden Valley Lake	CA	95467	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Self Employed	Book Seller		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1752 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Elyn Walker		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2014 Transaction ID : 4240189
Mailing Address 20230 Heartwood Court		Amount of Each Receipt this Period 20.00
City Hidden Valley Lake	State CA	
Zip Code 95467		Aggregate Year-to-Date ▼ 240.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Book Seller	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Doctor Nancy J. Walker		Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2014 Transaction ID : 4228175
Mailing Address 6414 Wiscasset Road		Amount of Each Receipt this Period 15.00
City Bethesda	State MD	
Zip Code 20816		Aggregate Year-to-Date ▼ 335.16
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Lecturer, Consultant, Mentor	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Ms. Jessie Walker		Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2014 Transaction ID : 4238022
Mailing Address 170 W. End Ave., Apt. 26t		Amount of Each Receipt this Period 75.00
City New York	State NY	
Zip Code 10023		Aggregate Year-to-Date ▼ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 1753 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mary Wallace
 Full Name (Last, First, Middle Initial)
 Mailing Address 1014 W White St
 City Champaign State IL Zip Code 61821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241590
 Amount of Each Receipt this Period
 15.00

B. Mr. O. J. Wallace
 Full Name (Last, First, Middle Initial)
 Mailing Address 6407 Jefferson Pointe Cir.
 City Clairton State PA Zip Code 15025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240320
 Amount of Each Receipt this Period
 20.00

C. Ms. Patricia B. Wallace
 Full Name (Last, First, Middle Initial)
 Mailing Address 831 Moonlight Drive
 City York State PA Zip Code 17402
 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 ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240192
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 1754 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Gloria Wallace

Mailing Address 132 Lancaster Dr., #610

City Irvington State VA Zip Code 22480

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 05 / 2014
Transaction ID : 4232786

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Peggy Wallace

Mailing Address Pwallace27@Gmail.Com

City Farmington Hills State MI Zip Code 48335

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Steuer & Assoc Admin Asst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 25 / 2014
Transaction ID : 4229676

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Peggy Wallace

Mailing Address Pwallace27@Gmail.Com

City Farmington Hills State MI Zip Code 48335

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Steuer & Assoc Admin Asst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 23 / 2014
Transaction ID : 4240191

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00

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 1755 OF 2648
	<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)
EMILY's List

A. Ms. Melanie Waller
Full Name (Last, First, Middle Initial)
Mailing Address 1441 E. Hazelwood Ln.
City Noble State IL Zip Code 62868
FEC ID number of contributing federal political committee. **C**
Name of Employer Richland Memorial Hospital Occupation Physician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **12 / 08 / 2014**
Transaction ID : 4233041
Amount of Each Receipt this Period **150.00**

B. Jack Walsh
Full Name (Last, First, Middle Initial)
Mailing Address 3965spyglass Hill Road
City Sarasota State FL Zip Code 34238
FEC ID number of contributing federal political committee. **C**
Name of Employer Essco Calibration Laboratory Occupation Ceo
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 17 / 2014**
Transaction ID : 4237774
Amount of Each Receipt this Period **25.00**

C. Mrs. Roberta Walsh
Full Name (Last, First, Middle Initial)
Mailing Address 1096 E Libby RD
City Shelton State WA Zip Code 98584
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 **500.00**

Date of Receipt **12 / 09 / 2014**
Transaction ID : 4233748
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **275.00**
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 1756 OF 2648
	<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)
EMILY's List

A. Ms. Marilyn Walsh
Full Name (Last, First, Middle Initial)
Mailing Address 18 Colony Cir
City Glastonbury State CT Zip Code 06033
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 ▼ 600.00

Date of Receipt 12 / 19 / 2014
Transaction ID : 4239029
Amount of Each Receipt this Period 50.00

B. Ms. Martha M. Walsh
Full Name (Last, First, Middle Initial)
Mailing Address 589 Pelham Rd. N.E.
City Atlanta State GA Zip Code 30324
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation Business Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 548.00

Date of Receipt 12 / 17 / 2014
Transaction ID : 4237440
Amount of Each Receipt this Period 260.00

C. Ms. Judith A. Walter
Full Name (Last, First, Middle Initial)
Mailing Address 4924 Tilden St NW
City Washington State DC Zip Code 20016
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4234734
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 410.00
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 1757 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Susan Waltner

Mailing Address 9 North Street, Box 773

City Williamsburg State MA Zip Code 01096

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 ▼
240.00

Date of Receipt
11 / 25 / 2014
Transaction ID : 4229996

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
B. Ms. Susan Waltner

Mailing Address 9 North Street, Box 773

City Williamsburg State MA Zip Code 01096

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 ▼
240.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4240194

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Ms. Susan Waltner

Mailing Address 9 North Street, Box 773

City Williamsburg State MA Zip Code 01096

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 ▼
240.00

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240620

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00

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 1758 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Frederick Waltz
 Full Name (Last, First, Middle Initial)
 Mailing Address 1666 Coffman Street
 City Falcon Heights State MN Zip Code 55108
 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 ▼
 270.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : 4228210
 Amount of Each Receipt this Period
 5.00

B. Frederick Waltz
 Full Name (Last, First, Middle Initial)
 Mailing Address 1666 Coffman Street
 City Falcon Heights State MN Zip Code 55108
 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 ▼
 270.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2014
Transaction ID : 4241087
 Amount of Each Receipt this Period
 5.00

C. Joseph Wambia
 Full Name (Last, First, Middle Initial)
 Mailing Address 3812 Terrawood Ct
 City Rockville State MD Zip Code 20853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Aecom Executive
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231850
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 1759 OF 2648
	<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)
EMILY's List

A. Ms. Kathryn A. Wanek
Full Name (Last, First, Middle Initial)

Mailing Address 2348 N Vuelta Entera

City Green Valley State AZ Zip Code 85614

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
11 / 25 / 2014
Transaction ID : 4227539

Amount of Each Receipt this Period
60.00

B. Ms. Amy Wang
Full Name (Last, First, Middle Initial)

Mailing Address 232 Parish Rd

City Worthington State MA Zip Code 01098

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Computer Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233654

Amount of Each Receipt this Period
20.00

C. Mrs. Charlotte R. Ward
Full Name (Last, First, Middle Initial)

Mailing Address 134 Norwood Avenue

City Auburn State AL Zip Code 36830

FEC ID number of contributing federal political committee. **C**

Name of Employer Auburn University Occupation Univ. Prof. Emerita

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233274

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 1760 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Miriam Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 1919 Lake Forest Rd.
 City Grapevine State TX Zip Code 76051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2014
Transaction ID : 4238139
 Amount of Each Receipt this Period
 15.00

B. Ms. Phyllis P. Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 2369 S. Madison St.
 City Denver State CO Zip Code 80210
 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 ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : 4243477
 Amount of Each Receipt this Period
 15.00

C. Ms. Joanne Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 2101 View Ct.
 City The Dalles State OR Zip Code 97058
 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 ▼ 780.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239171
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 1761 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patricia G. Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 412 Stanley Dr.
 City Santa Barbara State CA Zip Code 93105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Requested
 None Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4232471
 Amount of Each Receipt this Period
 100.00

B. Robin P. Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Maritime Drive
 City Surf City State NC Zip Code 28445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Requested
 Requested Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230107
 Amount of Each Receipt this Period
 20.00

c. Robin P. Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Maritime Drive
 City Surf City State NC Zip Code 28445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Requested
 Requested Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240733
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 1762 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Grace Warnecke
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 West 67 Street, Apt. 7c
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 28 / 2014
Transaction ID : 4241591
 Amount of Each Receipt this Period
 100.00

B. Dr. Dona L. Warner
 Full Name (Last, First, Middle Initial)
 Mailing Address 5769 E. Corso Di Napoli
 City Long Beach State CA Zip Code 90803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231733
 Amount of Each Receipt this Period
 100.00

C. Ms. Nadine Warner
 Full Name (Last, First, Middle Initial)
 Mailing Address 44 Indian Trail Rd Tower
 City Tower Lakes State IL Zip Code 60010
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : 4237321
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 1763 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Richard Warner		Date of Receipt M M / D D / Y Y Y Y 11 / 27 / 2014 Transaction ID : 4228387
Mailing Address 3100 Newport Ct.		Amount of Each Receipt this Period 100.00
City Arlington	State TX	Zip Code 76015
FEC ID number of contributing federal political committee. C	Name of Employer Sds	Occupation Sw Engineer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Richard Warner		Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2014 Transaction ID : 4241064
Mailing Address 3100 Newport Ct.		Amount of Each Receipt this Period 100.00
City Arlington	State TX	Zip Code 76015
FEC ID number of contributing federal political committee. C	Name of Employer Sds	Occupation Sw Engineer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. Ms. Patricia Warner		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2014 Transaction ID : 4239030
Mailing Address 40 Ware Road Apt. 7		Amount of Each Receipt this Period 15.00
City Belchertown	State MA	Zip Code 01007
FEC ID number of contributing federal political committee. C	Name of Employer Requested	Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional).....▶	215.00
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 1764 OF 2648
	<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)
EMILY's List

A. Ms. Thelma Warnock
Full Name (Last, First, Middle Initial)
Mailing Address 700 Sieverkropp DR
City Hood River State OR Zip Code 97031
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 ▼ 360.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4230110
Amount of Each Receipt this Period 30.00

B. Ms. Thelma Warnock
Full Name (Last, First, Middle Initial)
Mailing Address 700 Sieverkropp DR
City Hood River State OR Zip Code 97031
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 ▼ 360.00

Date of Receipt 12 / 26 / 2014
Transaction ID : 4240736
Amount of Each Receipt this Period 30.00

C. Jane Washington
Full Name (Last, First, Middle Initial)
Mailing Address 2222 Old Welsh Rd
City Willow Grove State PA Zip Code 19090
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Real Estate Owner/Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 15 / 2014
Transaction ID : 4236710
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 1765 OF 2648
	<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)
EMILY's List

A. Ms. Jacqueline Washington
Full Name (Last, First, Middle Initial)
Mailing Address 2780 Unicorn Ln NW
City Washington State DC Zip Code 20015
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Attorney
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 11 / 2014**
Transaction ID : 4234708
Amount of Each Receipt this Period **100.00**

B. Gerald J. Wasserburg
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2959
City Florence State OR Zip Code 97439
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **315.00**

Date of Receipt **12 / 26 / 2014**
Transaction ID : 4240896
Amount of Each Receipt this Period **35.00**

C. Bronna Wasserman
Full Name (Last, First, Middle Initial)
Mailing Address 330 W. Diversey Pkwy
City Chicago State IL Zip Code 60657
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 **300.00**

Date of Receipt **11 / 27 / 2014**
Transaction ID : 4228345
Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **160.00**
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 1766 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Bronna Wasserman		Date of Receipt
Mailing Address 330 W. Diversey Pkwy		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chicago	IL	60657
FEC ID number of contributing federal political committee.		Transaction ID : 4241182
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Rita Waterman		Date of Receipt
Mailing Address 39 Benson PL		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Fairfield	CT	06824
FEC ID number of contributing federal political committee.		Transaction ID : 4227552
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
None	Retired	
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. Carolyn Waterman		Date of Receipt
Mailing Address 8320 N.W. 39th St.		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bethany	OK	73008
FEC ID number of contributing federal political committee.		Transaction ID : 4239031
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Southern Nazarene University	Professor	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="270.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1768 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Patricia Waterston		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2014 Transaction ID : 4239032
Mailing Address 5815 Princeton Ave NE		Amount of Each Receipt this Period 50.00
City Seattle	State WA	Zip Code 98105
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Mr. Howard K Watkins		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2014 Transaction ID : 4232476
Mailing Address 1785 W. Dovewood Lane		Amount of Each Receipt this Period 95.00
City Fresno	State CA	Zip Code 93711
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1190.00	

Full Name (Last, First, Middle Initial) C. Linda Watkins		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236682
Mailing Address 638 9th Ave.		Amount of Each Receipt this Period 15.00
City San Francisco	State CA	Zip Code 94118
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 ▼ 230.00	

SUBTOTAL of Receipts This Page (optional).....▶	160.00
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 1769 OF 2648
	<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)
EMILY's List

A. Ms. Gretchen Watkins
Full Name (Last, First, Middle Initial)
Mailing Address 5395 S. Grant Street

City Littleton	State CO	Zip Code 80121
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Real Estate Broker	Occupation Watkins Realty, Inc.
--	------------------------------------

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
12	/	11	/	2014

Transaction ID : 4244752

Amount of Each Receipt this Period

25.00

B. David Watkins
Full Name (Last, First, Middle Initial)
Mailing Address 715 NE Oak St. C

City Pullman	State WA	Zip Code 99163
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Wsu	Occupation Professor
-------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	14	/	2014

Transaction ID : 4235477

Amount of Each Receipt this Period

25.00

C. Ms. Clare Watsky
Full Name (Last, First, Middle Initial)
Mailing Address 770 5th Avenue

City San Francisco	State CA	Zip Code 94118
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer San Francisco Unified School District	Occupation Teacher Librarian
---	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4229410

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 1770 OF 2648
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Clare Watsky		Date of Receipt
Mailing Address 770 5th Avenue		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
San Francisco	CA	94118
FEC ID number of contributing federal political committee.		Transaction ID : 4241821
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
San Francisco Unified School District	Teacher Librarian	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="410.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Mary D. Watson		Date of Receipt
Mailing Address 1495 W. Pine Grove Road		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Pa Furnace	PA	16865
FEC ID number of contributing federal political committee.		Transaction ID : 4244844
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="290.00"/>	

Full Name (Last, First, Middle Initial) C. Melissa Watson-Lafond		Date of Receipt
Mailing Address 12712 Admiralty Way Apt G305		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Everett	WA	98204
FEC ID number of contributing federal political committee.		Transaction ID : 4228181
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Malika's Best	Self Employed	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="550.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="95.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1771 OF 2648
	<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)
EMILY's List

A. Melissa Watson-Lafond
Full Name (Last, First, Middle Initial)

Mailing Address 12712 Admiralty Way
Apt G305

City Everett State WA Zip Code 98204

FEC ID number of contributing federal political committee. **C**

Name of Employer Malika's Best Occupation Self Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240840

Amount of Each Receipt this Period
50.00

B. Mr. Glenn H. Watts
Full Name (Last, First, Middle Initial)

Mailing Address 1767 Southview Dr

City Yellow Springs State OH Zip Code 45387

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 ▼
700.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230255

Amount of Each Receipt this Period
100.00

C. Ms. Doris L. Weatherford
Full Name (Last, First, Middle Initial)

Mailing Address 5425 County Road 579

City Seffner State FL Zip Code 33584

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Author

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
12 / 08 / 2014
Transaction ID : 4233532

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00

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 1772 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Doris L. Weatherford		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2014
Mailing Address 5425 County Road 579		Transaction ID : 4240198
City Seffner	State FL	Zip Code 33584
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Self	Occupation Author	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Ms. Rita P. Weathersby		Date of Receipt M M / D D / Y Y Y Y 12 / 08 / 2014
Mailing Address 312 Lincoln Avenue		Transaction ID : 4233655
City Portsmouth	State NH	Zip Code 03801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Tom Weaver		Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2014
Mailing Address 17135 136th PI SE		Transaction ID : 4229411
City Renton	State WA	Zip Code 98058
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Sterling Appraisal Group	Occupation Real Estate Appraiser	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 1773 OF 2648
	<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)
EMILY's List

A. Tom Weaver
Full Name (Last, First, Middle Initial)

Mailing Address 17135 136th PI SE

City Renton State WA Zip Code 98058

FEC ID number of contributing federal political committee. **C**

Name of Employer Sterling Appraisal Group Occupation Real Estate Appraiser

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
 12 / 28 / 2014
Transaction ID : 4242397

Amount of Each Receipt this Period
 25.00

B. Mr. David L. Webb
Full Name (Last, First, Middle Initial)

Mailing Address 781 Pebblebrook Dr

City Willoughby Hills State OH Zip Code 44094

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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4226716

Amount of Each Receipt this Period
 40.00

C. Mrs. Joan Webb
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4213

City Carmel State CA Zip Code 93921

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 ▼ 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234668

Amount of Each Receipt this Period
 1200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1265.00

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 1774 OF 2648
	<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)
EMILY's List

A. Ms. Bonnie Webb
Full Name (Last, First, Middle Initial)

Mailing Address 317 S. Oakhurst Drive

City State Zip Code
Beverly Hills CA 90212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

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
12 / 01 / 2014
Transaction ID : 4230871

Amount of Each Receipt this Period
100.00

B. Mr. Lowell Webb
Full Name (Last, First, Middle Initial)

Mailing Address 15201 Longbow Drive

City State Zip Code
Anchorage AK 99516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
State Of Alaska Nurse

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
233.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2014
Transaction ID : 4231905

Amount of Each Receipt this Period
10.00

C. William J. Webb
Full Name (Last, First, Middle Initial)

Mailing Address 11652 Norgrove Ln

City State Zip Code
Los Alamitos CA 90720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014
Transaction ID : 4236699

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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 1775 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Susan Weber
 Full Name (Last, First, Middle Initial)
 Mailing Address 521 Fern Place NW
 City Washington State DC Zip Code 20012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Hinckley Pottery Inc. Manager/Owner
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 12 / 19 / 2014
Transaction ID : 4239034
 Amount of Each Receipt this Period
 20.00

B. Ms. Susan F. Weber
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Pepper Lane
 City Albany State NY Zip Code 12211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Requested Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 12 / 03 / 2014
Transaction ID : 4232134
 Amount of Each Receipt this Period
 20.00

C. Marysue Wechsler
 Full Name (Last, First, Middle Initial)
 Mailing Address 340 Gulf Of Mexico Dr Apt 111
 City Longboat Key State FL Zip Code 34228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Lrwl Inc Hr
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 575.00

Date of Receipt
 12 / 02 / 2014
Transaction ID : 4231257
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00
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 1777 OF 2648
	<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)
EMILY's List

A. Dr. Jean Weigert
Full Name (Last, First, Middle Initial)

Mailing Address 5 Nilas Way

City Simsbury State CT Zip Code 06070

FEC ID number of contributing federal political committee. **C**

Name of Employer Mandell & Blau Md's Pc Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : 4243572

Amount of Each Receipt this Period
300.00

B. Mr. Anthony Weil
Full Name (Last, First, Middle Initial)

Mailing Address 2250 Plainfield Ave N

City Piscataway State NJ Zip Code 08854

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 ▼ **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : 4236712

Amount of Each Receipt this Period
20.00

C. Mr. Anthony Weil
Full Name (Last, First, Middle Initial)

Mailing Address 2250 Plainfield Ave N

City Piscataway State NJ Zip Code 08854

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 ▼ **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014

Transaction ID : 4241766

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	345.00
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 1778 OF 2648
	<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)
EMILY's List

A. Mr. Robert Wein
Full Name (Last, First, Middle Initial)
Mailing Address 12018 Canter Lane
City Reston State VA Zip Code 20191
FEC ID number of contributing federal political committee. **C**
Name of Employer Wein & Associates Occupation Consultant
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **260.00**

Date of Receipt **12 / 20 / 2014**
Transaction ID : 4239273
Amount of Each Receipt this Period **15.00**

B. Ms. Sharon L. Weiner
Full Name (Last, First, Middle Initial)
Mailing Address 425 E 63rd St Apt E3d
City New York State NY Zip Code 10065
FEC ID number of contributing federal political committee. **C**
Name of Employer Murphy McKeon ,Pc Occupation Attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 05 / 2014**
Transaction ID : 4232915
Amount of Each Receipt this Period **25.00**

C. Lonnie Weinheimer
Full Name (Last, First, Middle Initial)
Mailing Address 1304 Cresthaven Dr.
City Silver Spring State MD Zip Code 20903
FEC ID number of contributing federal political committee. **C**
Name of Employer Mapmg Occupation Md
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **480.00**

Date of Receipt **11 / 27 / 2014**
Transaction ID : 4228366
Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **60.00**
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 1779 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Lonnie Weinheimer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2014
Mailing Address 1304 Cresthaven Dr.		Transaction ID : 4240978
City Silver Spring	State MD	Zip Code 20903
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Mapmg	Occupation Md	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) B. Lonnie Weinheimer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2014
Mailing Address 1304 Cresthaven Dr.		Transaction ID : 4234527
City Silver Spring	State MD	Zip Code 20903
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer Mapmg	Occupation Md	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) C. Mrs. Diann L Weinman		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 03 / 2014
Mailing Address 4310 NW 6th Drive		Transaction ID : 4232146
City Des Moines	State IA	Zip Code 50313
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 55.00	
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 ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 1780 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Loribeth Weinstein		Date of Receipt
Mailing Address 2113 O St NW Apt A		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20037
FEC ID number of contributing federal political committee.		Transaction ID : 4240201
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Jwi	Ceo	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Dorothy Weinstein		Date of Receipt
Mailing Address 2818 N. 46 Ave. K492		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hollywood	FL	33021
FEC ID number of contributing federal political committee.		Transaction ID : 4237862
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Susan Weinstein-Winter		Date of Receipt
Mailing Address 46 Homestead St		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
Waban	MA	02468
FEC ID number of contributing federal political committee.		Transaction ID : 4242543
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
Self Employed	Social Worker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="175.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1781 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Judith Weinstock		Date of Receipt
Mailing Address 88 larch rd.		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City cambridge	State MA	Zip Code 02138
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4240366
Name of Employer Family Access		Amount of Each Receipt this Period
Occupation Early Education Ans Care		<input type="text" value="400.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="500.00"/>		

Full Name (Last, First, Middle Initial) B. Ms. Elizabeth B. Weirich		Date of Receipt
Mailing Address 7707 N. Brookline Dr., Apt. 425		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Madison	State WI	Zip Code 53719
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4228183
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="15.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="380.00"/>		

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth B. Weirich		Date of Receipt
Mailing Address 7707 N. Brookline Dr., Apt. 425		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Madison	State WI	Zip Code 53719
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4240669
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="15.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="380.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="430.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1782 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ronald Weis
 Full Name (Last, First, Middle Initial)
 Mailing Address 1522 Greenbriar Ave
 City Corona State CA Zip Code 92880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Dod Dcma Engineer
 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 / 28 / 2014
Transaction ID : 4229416
 Amount of Each Receipt this Period
 10.00

B. Ronald Weis
 Full Name (Last, First, Middle Initial)
 Mailing Address 1522 Greenbriar Ave
 City Corona State CA Zip Code 92880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Dod Dcma Engineer
 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
 12 / 28 / 2014
Transaction ID : 4242399
 Amount of Each Receipt this Period
 10.00

C. Ronald Weis
 Full Name (Last, First, Middle Initial)
 Mailing Address 1522 Greenbriar Ave
 City Corona State CA Zip Code 92880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Dod Dcma Engineer
 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
 12 / 05 / 2014
Transaction ID : 4232877
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	35.00
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 1783 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara C. Weisenfeld		Date of Receipt M M / D D / Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232688
Mailing Address 73 Deerpath Road		Amount of Each Receipt this Period 10.00
City Roslyn Heights	State NY	Zip Code 11577
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Ms. Beverly J. Weiss		Date of Receipt M M / D D / Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4239035
Mailing Address 7550 N 16th St Apt 6108		Amount of Each Receipt this Period 100.00
City Phoenix	State AZ	Zip Code 85020
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) C. Mrs. Rita Weiss		Date of Receipt M M / D D / Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232875
Mailing Address 2300 Shire Ln		Amount of Each Receipt this Period 75.00
City Davis	State CA	Zip Code 95616
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 925.00	

SUBTOTAL of Receipts This Page (optional).....▶	185.00
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 1784 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Barbara Weiss
 Full Name (Last, First, Middle Initial)
 Mailing Address 1122 W Palm Ave
 City Burbank State CA Zip Code 91506
 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 ▼ 442.00

Date of Receipt
 12 / 01 / 2014
Transaction ID : 4230874
 Amount of Each Receipt this Period
 28.00

B. Ms. Allie Weissman
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 Churchill Avenue
 City Palo Alto State CA Zip Code 94301
 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 ▼ 1000.00

Date of Receipt
 12 / 15 / 2014
Transaction ID : 4236539
 Amount of Each Receipt this Period
 500.00

C. Ms. Renee Weitzner
 Full Name (Last, First, Middle Initial)
 Mailing Address 4700 Connecticut Ave NW Apt 402
 City Washington State DC Zip Code 20008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Tutor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 11 / 26 / 2014
Transaction ID : 4228184
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	563.00
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 1785 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Renee Weitzner
 Full Name (Last, First, Middle Initial)
 Mailing Address 4700 Connecticut Ave NW Apt 402
 City Washington State DC Zip Code 20008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Tutor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **265.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240870
 Amount of Each Receipt this Period
35.00

B. Frank Welch
 Full Name (Last, First, Middle Initial)
 Mailing Address 22632 N Hermosillo Dr
 City Sun City West State AZ Zip Code 85375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **530.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4239036
 Amount of Each Receipt this Period
15.00

C. Frank Welch
 Full Name (Last, First, Middle Initial)
 Mailing Address 22632 N Hermosillo Dr
 City Sun City West State AZ Zip Code 85375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **530.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234961
 Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....	70.00
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 1786 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Laura S. Welch
 Full Name (Last, First, Middle Initial)
 Mailing Address 7118 Cedar Ave
 City Takoma Park State MD Zip Code 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230143
 Amount of Each Receipt this Period
 20.00

B. Dr. Laura S. Welch
 Full Name (Last, First, Middle Initial)
 Mailing Address 7118 Cedar Ave
 City Takoma Park State MD Zip Code 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240790
 Amount of Each Receipt this Period
 20.00

C. Dr. Laura S. Welch
 Full Name (Last, First, Middle Initial)
 Mailing Address 7118 Cedar Ave
 City Takoma Park State MD Zip Code 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229417
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 1787 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Laura S. Welch		Date of Receipt
Mailing Address 7118 Cedar Ave		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Takoma Park	MD	20912
FEC ID number of contributing federal political committee.		Transaction ID : 4242400
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
None	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="540.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. David Welden		Date of Receipt
Mailing Address 828 Indiana Avenue		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Iowa Falls	IA	50126
FEC ID number of contributing federal political committee.		Transaction ID : 4230875
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3138.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Rev. Mary Wellemeyer		Date of Receipt
Mailing Address P.O. Box 54		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Columbia Falls	MT	59912
FEC ID number of contributing federal political committee.		Transaction ID : 4229725
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Glacier Unitarian Universalist Fellows	Minister	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="270.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="550.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1788 OF 2648
	<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)
EMILY's List

A. Rev. Mary Wellemeyer
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 54

City Columbia Falls	State MT	Zip Code 59912
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Glacier Unitarian Universalist Fellows	Occupation Minister
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240756

Amount of Each Receipt this Period

80.00	20.00	20.00	20.00	20.00
-------	-------	-------	-------	-------

25.00

B. Robert Wells
Full Name (Last, First, Middle Initial)
Mailing Address 255 Donohoe St

City East Palo Alto	State CA	Zip Code 94303
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Ariba	Occupation Software Engineer
---------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **370.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241801

Amount of Each Receipt this Period

80.00	20.00	20.00	20.00	20.00
-------	-------	-------	-------	-------

35.00

C. Ms. Nancy Wells
Full Name (Last, First, Middle Initial)
Mailing Address 1524 Yonkee Ave.

City Sheridan	State WY	Zip Code 82801
------------------	-------------	-------------------

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 ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2014

Transaction ID : 4232947

Amount of Each Receipt this Period

80.00	20.00	20.00	20.00	20.00
-------	-------	-------	-------	-------

20.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 1789 OF 2648
	<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)
EMILY's List

A. Dr. Janet Wells
Full Name (Last, First, Middle Initial)
Mailing Address 4149 Diplomacy Circle
City Tallahassee State FL Zip Code 32308
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 **1500.00**

Date of Receipt **12 / 26 / 2014**
Transaction ID : 4240310
Amount of Each Receipt this Period **500.00**

B. Ms. Donna Wells
Full Name (Last, First, Middle Initial)
Mailing Address 16431 Trenton Road
City Upperco State MD Zip Code 21155
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **460.00**

Date of Receipt **12 / 10 / 2014**
Transaction ID : 4234628
Amount of Each Receipt this Period **40.00**

C. Ms. Eileen Welsh
Full Name (Last, First, Middle Initial)
Mailing Address 1201 Blue Johnson Rd
City Hopkins State SC Zip Code 29061
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 **225.00**

Date of Receipt **11 / 26 / 2014**
Transaction ID : 4227626
Amount of Each Receipt this Period **35.00**

SUBTOTAL of Receipts This Page (optional)..... **575.00**
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 1790 OF 2648
	<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)
EMILY's List

A. Ms. Susan Welsh
Full Name (Last, First, Middle Initial)

Mailing Address 832 Frost RD

City Saluda State NC Zip Code 28773

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 ▼ **525.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014

Transaction ID : 4235490

Amount of Each Receipt this Period
50.00

B. Mr. John Welty
Full Name (Last, First, Middle Initial)

Mailing Address Box 25886

City Los Angeles State CA Zip Code 90025

FEC ID number of contributing federal political committee. **C**

Name of Employer Fox Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **295.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014

Transaction ID : 4240822

Amount of Each Receipt this Period
50.00

C. Ms. Audrey Wennink
Full Name (Last, First, Middle Initial)

Mailing Address 610 W. Briar Place

City Chicago State IL Zip Code 60657

FEC ID number of contributing federal political committee. **C**

Name of Employer Cambridge Systematics Occupation transportation planner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4229421

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **130.00**

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 1791 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Audrey Wennink
 Full Name (Last, First, Middle Initial)
 Mailing Address 610 W. Briar Place
 City Chicago State IL Zip Code 60657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cambridge Systematics Occupation transportation planner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242403
 Amount of Each Receipt this Period
 30.00

B. Ms. Lucille Werlinich
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 Ponds Lane
 City Purchase State NY Zip Code 10577
 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236737
 Amount of Each Receipt this Period
 100.00

C. Warren Wertheimer
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Adrain Way
 City San Rafael State CA Zip Code 94903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4243144
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 1792 OF 2648
	<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)
EMILY's List

A. Mrs. Carolyn L. Wesner
 Full Name (Last, First, Middle Initial)
 Mailing Address 2457 Pfeifle St.
 City Howell State MI Zip Code 48843
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4239037
 Amount of Each Receipt this Period
 50.00

B. Anthony West
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 College Avenue, Unit E
 City Frederick State MD Zip Code 21701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2014
Transaction ID : 4236148
 Amount of Each Receipt this Period
 25.00

C. Anthony West
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 College Avenue, Unit E
 City Frederick State MD Zip Code 21701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239322
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 1793 OF 2648
	<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)
EMILY's List

A. Nancy West
Full Name (Last, First, Middle Initial)

Mailing Address 13700 Shaker Blvd
#410

City Cleveland State OH Zip Code 44120

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 ▼
300.00

Date of Receipt
11 / 25 / 2014
Transaction ID : 4230129

Amount of Each Receipt this Period
25.00

B. Nancy West
Full Name (Last, First, Middle Initial)

Mailing Address 13700 Shaker Blvd
#410

City Cleveland State OH Zip Code 44120

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 ▼
300.00

Date of Receipt
12 / 23 / 2014
Transaction ID : 4240206

Amount of Each Receipt this Period
25.00

C. Mrs. Louis West
Full Name (Last, First, Middle Initial)

Mailing Address 3438 S Macgregor Way

City Houston State TX Zip Code 77021

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 ▼
368.00

Date of Receipt
12 / 02 / 2014
Transaction ID : 4231259

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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 1794 OF 2648
	<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)
EMILY's List

A. Gregory West
Full Name (Last, First, Middle Initial)
Mailing Address 110 Greenbriar Ct.
City Brandenburg State KY Zip Code 40108
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 11 / 25 / 2014
Transaction ID : 4230189
Amount of Each Receipt this Period 100.00

B. Gregory West
Full Name (Last, First, Middle Initial)
Mailing Address 110 Greenbriar Ct.
City Brandenburg State KY Zip Code 40108
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 23 / 2014
Transaction ID : 4240207
Amount of Each Receipt this Period 100.00

C. Ms. Pauline Westbrook
Full Name (Last, First, Middle Initial)
Mailing Address 4707 Balcones Dr
City Austin State TX Zip Code 78731
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Housewife
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 11 / 2014
Transaction ID : 4234706
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 1795 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Peter Westlin		Date of Receipt
Mailing Address 5506 Frenchman's Creek		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Durham	NC	27713
FEC ID number of contributing federal political committee.		Transaction ID : 4230876
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Marcia Westra		Date of Receipt
Mailing Address 11 Ashwood Ter		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Newburgh	NY	12550
FEC ID number of contributing federal political committee.		Transaction ID : 4227508
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="38.00"/>
Name of Employer	Occupation	
Self	Psychotherapist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="286.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Ardis J. Westwood		Date of Receipt
Mailing Address 7020 E Girard Ave. Apt. 203		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
Denver	CO	80224
FEC ID number of contributing federal political committee.		Transaction ID : 4236463
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="338.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1796 OF 2648
	<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)
EMILY's List

A. Dr. Janice W. Wetzel
Full Name (Last, First, Middle Initial)

Mailing Address 185 West End Avenue. Apt. 16-S

City New York	State NY	Zip Code 10023
------------------	-------------	-------------------

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 ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	11	/	2014

Transaction ID : 4235171

Amount of Each Receipt this Period
100.00

B. Ms. Ardis L. Wexler
Full Name (Last, First, Middle Initial)

Mailing Address 7520 Cahill Road

City Edina	State MN	Zip Code 55439
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4229424

Amount of Each Receipt this Period
20.00

C. Ms. Ardis L. Wexler
Full Name (Last, First, Middle Initial)

Mailing Address 7520 Cahill Road

City Edina	State MN	Zip Code 55439
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4241595

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 1797 OF 2648
(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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Virginia Wexman

Mailing Address 1111 South Grand Ave.
Apt. 818

City Los Angeles State CA Zip Code 90015

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 ▼
345.00

Date of Receipt
11 / 25 / 2014
Transaction ID : 4230065

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Virginia Wexman

Mailing Address 1111 South Grand Ave.
Apt. 818

City Los Angeles State CA Zip Code 90015

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 ▼
345.00

Date of Receipt
12 / 10 / 2014
Transaction ID : 4234624

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Virginia Wexman

Mailing Address 1111 South Grand Ave.
Apt. 818

City Los Angeles State CA Zip Code 90015

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 ▼
345.00

Date of Receipt
12 / 26 / 2014
Transaction ID : 4240693

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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 1798 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Claudia Wheatley

Mailing Address 60 Hickory Circle

City Ithaca	State NY	Zip Code 14850
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FEC ID number of contributing federal political committee. **C**

Name of Employer Cornell University	Occupation Writer
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.16**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4231690

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)
B. Ms. Alice A. Wheatley

Mailing Address 15820 Loma Vista Ave.

City Los Gatos	State CA	Zip Code 95032
-------------------	-------------	-------------------

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 ▼ **215.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : 4229426

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)
C. Ms. Alice A. Wheatley

Mailing Address 15820 Loma Vista Ave.

City Los Gatos	State CA	Zip Code 95032
-------------------	-------------	-------------------

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 ▼ **215.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : 4242405

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 1799 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Faith E. Wheeler
 Full Name (Last, First, Middle Initial)
 Mailing Address 818 Whittier Place NW
 City Washington State DC Zip Code 20012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Constituents Occupation Advisory Fneighborhood Commissioner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2014
Transaction ID : 4234008
 Amount of Each Receipt this Period
 10.00

B. Kenneth Wheeler
 Full Name (Last, First, Middle Initial)
 Mailing Address 2830 Hoard St
 City Madison State WI Zip Code 53704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236670
 Amount of Each Receipt this Period
 15.00

C. Ms. Wilma A. Wheeler
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 3208
 City Mammoth Lakes State CA Zip Code 93546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232163
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00
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 1800 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Charles G. Whelpton
 Full Name (Last, First, Middle Initial)
 Mailing Address 66 Scarlet Oak Cir
 City Oxford State OH Zip Code 45056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 17 / 2014
Transaction ID : 4237531
 Amount of Each Receipt this Period
 50.00

B. Ms. Elizabeth Whitaker
 Full Name (Last, First, Middle Initial)
 Mailing Address 3411 Look Road
 City Ellensburg State WA Zip Code 98926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Community Health Of Central Washington Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2014
Transaction ID : 4239332
 Amount of Each Receipt this Period
 20.00

C. Ms. Annette C. White
 Full Name (Last, First, Middle Initial)
 Mailing Address 9869 Cielo Vista
 City Escondido State CA Zip Code 92026
 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 ▼
 278.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232819
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 1801 OF 2648
	<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)
EMILY's List

A. Ms. Louise White
Full Name (Last, First, Middle Initial)
Mailing Address 5908 Nevada Ave. NW

City Wasington	State DC	Zip Code 20015
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

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
12	/	23	/	2014

Transaction ID : 4240209

Amount of Each Receipt this Period
25.00

B. Ms. Elise White
Full Name (Last, First, Middle Initial)
Mailing Address 2600 Woolsey St.

City Berkeley	State CA	Zip Code 94705
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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 ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2014

Transaction ID : 4239138

Amount of Each Receipt this Period
25.00

C. Ms. Nancy M. White
Full Name (Last, First, Middle Initial)
Mailing Address 1516 Enyart Way #204

City Annapolis	State MD	Zip Code 21409
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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 ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2014

Transaction ID : 4233771

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 1802 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Edward A. White		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2014 Transaction ID : 4227620
Mailing Address 5786 Echo Canyon Circle		Amount of Each Receipt this Period 224.00
City Phoenix	State AZ	Zip Code 85018
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 ▼ 769.00	

Full Name (Last, First, Middle Initial) B. Ms. Diana White		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2014 Transaction ID : 4236366
Mailing Address 9924 SW Quail Post Rd.		Amount of Each Receipt this Period 20.00
City Portland	State OR	Zip Code 97219
FEC ID number of contributing federal political committee. C		
Name of Employer Portland State University	Occupation Research	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Ms. Judith White		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229435
Mailing Address 111 West Cedar Ave		Amount of Each Receipt this Period 100.00
City Denver	State CO	Zip Code 80223
FEC ID number of contributing federal political committee. C		
Name of Employer University Of Denver	Occupation Non Profit Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4800.00	

SUBTOTAL of Receipts This Page (optional).....▶	344.00
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 1803 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Judith White

Mailing Address 111 West Cedar Ave

City State Zip Code
Denver CO 80223

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University Of Denver Non Profit Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4800.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4242410

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Gwin White

Mailing Address 312 N Stonehedge Dr.

City State Zip Code
Columbia SC 29210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

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 / 28 / 2014
Transaction ID : 4229433

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Gwin White

Mailing Address 312 N Stonehedge Dr.

City State Zip Code
Columbia SC 29210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

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
12 / 28 / 2014
Transaction ID : 4242408

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

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 1804 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Katherine Elizabeth White
 Full Name (Last, First, Middle Initial)
 Mailing Address 5493 Marsh Rd
 City Haslett State MI Zip Code 48840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233279
 Amount of Each Receipt this Period
 140.00

B. Ms. Isabel Whiting
 Full Name (Last, First, Middle Initial)
 Mailing Address 3003 Willow Spring Ct.
 City Williamsburg State VA Zip Code 23185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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
 12 / 29 / 2014
Transaction ID : 4242538
 Amount of Each Receipt this Period
 100.00

C. Ms. Linda Whitlock
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 Saxon Road
 City Newton State MA Zip Code 02461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 self-employed executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230185
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 340.00
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 1805 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Linda Whitlock		Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2014
Mailing Address 30 Saxon Road		Transaction ID : 4240852
City Newton	State MA	Zip Code 02461
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer self-employed	Occupation executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) B. Ms. Grace Whitman		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2014
Mailing Address PO Box 450		Transaction ID : 4237792
City Barnesville	State MD	Zip Code 20838
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Self	Occupation Psychotherapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Ms. Kathryn J Whitmire		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2014
Mailing Address 66-59 Haleiwa Loop		Transaction ID : 4239195
City Haleiwa	State HI	Zip Code 96712
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.00
Name of Employer None	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 996.99	

SUBTOTAL of Receipts This Page (optional).....▶	233.00
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 1806 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Sheila Whitney
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Pinewood Rd.
 City Poughkeepsie State NY Zip Code 12603
 Date of Receipt 12 / 14 / 2014
 Transaction ID : 4235596
 Amount of Each Receipt this Period 35.00
 FEC ID number of contributing federal political committee. C
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 635.00

B. Ms. Margaret A. Whitney
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 West Mercer Place # 203
 City Seattle State WA Zip Code 98119
 Date of Receipt 12 / 23 / 2014
 Transaction ID : 4240212
 Amount of Each Receipt this Period 20.00
 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 240.00

C. Ms. Jane Widseth
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Brians Way
 City Wayne State PA Zip Code 19087
 Date of Receipt 12 / 01 / 2014
 Transaction ID : 4230879
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Haverford College Occupation Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
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 1807 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Elizabeth Wieman		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233464
Mailing Address 2038 NE 123rd St		Amount of Each Receipt this Period 10.00
City Seattle	State WA	
Zip Code 98125		Aggregate Year-to-Date ▼ 235.00
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) ▼

Full Name (Last, First, Middle Initial) B. Mr. Richard K. Wiersba		Date of Receipt 11 / 28 / 2014 Transaction ID : 4229436
Mailing Address 66 Cleary Court Unit 1308 Unit 1308		Amount of Each Receipt this Period 25.00
City San Francisco	State CA	
Zip Code 94109		Aggregate Year-to-Date ▼ 594.00
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Mr. Richard K. Wiersba		Date of Receipt 12 / 28 / 2014 Transaction ID : 4242411
Mailing Address 66 Cleary Court Unit 1308 Unit 1308		Amount of Each Receipt this Period 25.00
City San Francisco	State CA	
Zip Code 94109		Aggregate Year-to-Date ▼ 594.00
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....	60.00
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 1808 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Carolyn H Wierson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229437
Mailing Address 5445 Mallard Point		Amount of Each Receipt this Period 25.00
City Gainesville	State GA	Zip Code 30504
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 ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Dr. Carolyn H Wierson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014 Transaction ID : 4237126
Mailing Address 5445 Mallard Point		Amount of Each Receipt this Period 25.00
City Gainesville	State GA	Zip Code 30504
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 ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Dr. Carolyn H Wierson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4242412
Mailing Address 5445 Mallard Point		Amount of Each Receipt this Period 25.00
City Gainesville	State GA	Zip Code 30504
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 ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 1809 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Robert Wieseneck		Date of Receipt
Mailing Address 840 Walden Ln.		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Lake Forest	IL	60045
FEC ID number of contributing federal political committee.		Transaction ID : 4233299
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer Requested	Occupation Requested	
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. Ms. Martha Wiewel		Date of Receipt
Mailing Address 8613 N. Lodgepole Pine Trl.		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Tucson	AZ	85743
FEC ID number of contributing federal political committee.		Transaction ID : 4232362
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="60.00"/>
Name of Employer Requested	Occupation Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kerry Wiger		Date of Receipt
Mailing Address 5047 Summerhill Drive		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Oceanside	CA	92057
FEC ID number of contributing federal political committee.		Transaction ID : 4231886
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer Requested	Occupation Requested	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="330.00"/>
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 1810 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Dr. Nancy Wight

Mailing Address 1230 Trieste Dr.

City San Diego State CA Zip Code 92107

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Physician

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
 12 / 01 / 2014
Transaction ID : 4230880

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Joanie Wiinblad

Mailing Address 49 Raechel RD

City Randolph State MA Zip Code 02368

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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2014
Transaction ID : 4235478

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Ms. Barbara Wilbur

Mailing Address 1480 Moraga Rd
Suite I

City Moraga State CA Zip Code 94556

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

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
 12 / 17 / 2014
Transaction ID : 4237773

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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 1811 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Alan Wilcox		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233059
Mailing Address 3755 Peachtree Rd NE		Amount of Each Receipt this Period 100.00
City Atlanta	State GA	Zip Code 30319
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
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 ▼ 388.00	

Full Name (Last, First, Middle Initial) B. Mr. Ronald Wilcox		Date of Receipt 12 / 19 / 2014 Transaction ID : 4239038
Mailing Address 3344 E Lee St		Amount of Each Receipt this Period 25.00
City Tucson	State AZ	Zip Code 85716
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Zonge	Occupation Design Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) C. Ms. Lora Wildenthal		Date of Receipt 12 / 01 / 2014 Transaction ID : 4230881
Mailing Address 2012 Arlington St.		Amount of Each Receipt this Period 75.00
City Houston	State TX	Zip Code 77008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Rice University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 1812 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Loy Wiley

Mailing Address 222 Seaward Way

City Avon lake State OH Zip Code 44012

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

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
 12 / 03 / 2014
Transaction ID : 4231934

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. Ms. Laura Wilhelm

Mailing Address 2901 W Farragut # 1-S

City Chicago State IL Zip Code 60625

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Cpa

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4239039

Amount of Each Receipt this Period
 500.00

Full Name (Last, First, Middle Initial)
C. Penny Joy Wilhelmy

Mailing Address 3005 Banks Rd.

City Tallahassee State FL Zip Code 32309

FEC ID number of contributing federal political committee. **C**

Name of Employer Big Bend Community Based Care Occupation Contract Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228187

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.00

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 1813 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Penny Joy Wilhelmy		Date of Receipt
Mailing Address 3005 Banks Rd.		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Tallahassee	FL	32309
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4240671
Name of Employer	Occupation	Amount of Each Receipt this Period
Big Bend Community Based Care	Contract Coordinator	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Linda L. Wilke		Date of Receipt
Mailing Address 302 Mission Lane		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bunker Hill	WV	25413
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4230260
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="325.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Glenann Wilkerson		Date of Receipt
Mailing Address 9563 South College Ct		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Tulsa	OK	74137
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4231776
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="35.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2120.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1814 OF 2648
	<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)
EMILY's List

A. Ms. Glenann Wilkerson
Full Name (Last, First, Middle Initial)
Mailing Address 9563 South College Ct
City Tulsa State OK Zip Code 74137
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 ▼ 2120.00

Date of Receipt 12 / 03 / 2014
Transaction ID : 4231777
Amount of Each Receipt this Period 100.00

B. Mr. Donald Wilkerson
Full Name (Last, First, Middle Initial)
Mailing Address 5780 Waterbury Way #L
City Salt Lake City State UT Zip Code 84121
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Psychiatrist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 289.00

Date of Receipt 12 / 08 / 2014
Transaction ID : 4233586
Amount of Each Receipt this Period 11.00

C. Ms. Joan Wilkes
Full Name (Last, First, Middle Initial)
Mailing Address 937 Bobcat Blvd NE
City Albuquerque State NM Zip Code 87122
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 ▼ 225.00

Date of Receipt 11 / 26 / 2014
Transaction ID : 4227638
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional).....▶ 136.00
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 1815 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Karen Wilkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 2639 E Lake Shore Dr
 City Grayling State MI Zip Code 49738
 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 ▼ 575.00

Date of Receipt
 12 / 08 / 2014
Transaction ID : 4232982
 Amount of Each Receipt this Period
 25.00

B. Ms. Karen Wilkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 2639 E Lake Shore Dr
 City Grayling State MI Zip Code 49738
 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 ▼ 575.00

Date of Receipt
 12 / 31 / 2014
Transaction ID : 4243082
 Amount of Each Receipt this Period
 25.00

C. Mrs. Debra C Wilkinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 689 W 8TH ST
 City Zumbrota State MN Zip Code 55992
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 12 / 22 / 2014
Transaction ID : 4239491
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 1816 OF 2648
	<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)
EMILY's List

A. Dr. Carla E. Willetto
Full Name (Last, First, Middle Initial)
Mailing Address 380 Eagle Ridge Rd
City Fairbanks State AK Zip Code 99712
FEC ID number of contributing federal political committee. **C**
Name of Employer Univ Of Alaska Fairbanks Occupation Veterinarian
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 661.00

Date of Receipt 12 / 19 / 2014
Transaction ID : 4239040
Amount of Each Receipt this Period 15.00

B. Dr. Carla E. Willetto
Full Name (Last, First, Middle Initial)
Mailing Address 380 Eagle Ridge Rd
City Fairbanks State AK Zip Code 99712
FEC ID number of contributing federal political committee. **C**
Name of Employer Univ Of Alaska Fairbanks Occupation Veterinarian
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 661.00

Date of Receipt 12 / 23 / 2014
Transaction ID : 4240216
Amount of Each Receipt this Period 25.00

C. Suzann Willhite
Full Name (Last, First, Middle Initial)
Mailing Address 3905 Glenhurst Avenue S
City St Louis Park State MN Zip Code 55416
FEC ID number of contributing federal political committee. **C**
Name of Employer State Of Mn Occupation State Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 790.00

Date of Receipt 12 / 08 / 2014
Transaction ID : 4233716
Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
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 1817 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carol Williams		Date of Receipt
Mailing Address 108 Catharine Street		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City Philadelphia	State PA	Zip Code 19147
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4231264
Name of Employer Carol A. Williams		Amount of Each Receipt this Period
Occupation Financial Analyst		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Matilda K. Williams		Date of Receipt
Mailing Address PO Box 1027		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Toppenish	State WA	Zip Code 98948
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4229440
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="215.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Matilda K. Williams		Date of Receipt
Mailing Address PO Box 1027		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Toppenish	State WA	Zip Code 98948
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4242415
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="215.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1818 OF 2648
	<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)
EMILY's List

A. Ms. Nancy L. Williams
Full Name (Last, First, Middle Initial)

Mailing Address 3 Hummingbird Ct

City Hilton Head Island State SC Zip Code 29926

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 ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014

Transaction ID : 4232863

Amount of Each Receipt this Period
 15.00

B. Mr. John Williams
Full Name (Last, First, Middle Initial)

Mailing Address 2948 Ridgeway Ave

City Saint Louis State MO Zip Code 63114

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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4227436

Amount of Each Receipt this Period
 100.00

C. Prof. Norris Williams
Full Name (Last, First, Middle Initial)

Mailing Address 2430 NW 38 St

City Gainesville State FL Zip Code 32605

FEC ID number of contributing federal political committee. **C**

Name of Employer University Of Florida Occupation Biologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4229689

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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 1819 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Prof. Norris Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 2430 NW 38 St
 City Gainesville State FL Zip Code 32605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Florida Occupation Biologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4231995
 Amount of Each Receipt this Period
 10.00

B. Prof. Norris Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 2430 NW 38 St
 City Gainesville State FL Zip Code 32605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Florida Occupation Biologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240569
 Amount of Each Receipt this Period
 10.00

C. Prof. Norris Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 2430 NW 38 St
 City Gainesville State FL Zip Code 32605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Florida Occupation Biologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236723
 Amount of Each Receipt this Period
 55.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 1820 OF 2648
	<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)
EMILY's List

A. Ms. Darlean Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 3316 Lynne Haven Dr.
 City Windsor Mill State MD Zip Code 21244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231263
 Amount of Each Receipt this Period
 100.00

B. Vern Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 1500 SW Park Ave Apt 423
 City Portland State OR Zip Code 97201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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 / 28 / 2014
Transaction ID : 4229442
 Amount of Each Receipt this Period
 20.00

C. Vern Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 1500 SW Park Ave Apt 423
 City Portland State OR Zip Code 97201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 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
 12 / 28 / 2014
Transaction ID : 4242417
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 1821 OF 2648
	<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)
EMILY's List

A. Ms. Barbara Williamson
Full Name (Last, First, Middle Initial)

Mailing Address 919 Buchanan Street

City Albany State CA Zip Code 94706

FEC ID number of contributing federal political committee. **C**

Name of Employer Petaluma Health Center Occupation Midwife

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **830.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229443

Amount of Each Receipt this Period
50.00

B. Ms. Barbara Williamson
Full Name (Last, First, Middle Initial)

Mailing Address 919 Buchanan Street

City Albany State CA Zip Code 94706

FEC ID number of contributing federal political committee. **C**

Name of Employer Petaluma Health Center Occupation Midwife

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **830.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241375

Amount of Each Receipt this Period
50.00

C. Ms. Roberta Williamson
Full Name (Last, First, Middle Initial)

Mailing Address 1516 Sarkesian Dr.

City Petaluma State CA Zip Code 94954

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237759

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **120.00**

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 1822 OF 2648
	<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)
EMILY's List

A. Gail Williford
Full Name (Last, First, Middle Initial)
Mailing Address 357 N Post Oak Lane #213

City Houston	State TX	Zip Code 77024
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer St. Paul's Umc	Occupation Minister
------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : 4228189

Amount of Each Receipt this Period
5.00

B. Gail Williford
Full Name (Last, First, Middle Initial)
Mailing Address 357 N Post Oak Lane #213

City Houston	State TX	Zip Code 77024
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer St. Paul's Umc	Occupation Minister
------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4239041

Amount of Each Receipt this Period
5.00

C. Gail Williford
Full Name (Last, First, Middle Initial)
Mailing Address 357 N Post Oak Lane #213

City Houston	State TX	Zip Code 77024
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer St. Paul's Umc	Occupation Minister
------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240450

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional).....▶	15.00
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 1823 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Gail Williford
Full Name (Last, First, Middle Initial)

Mailing Address 357 N Post Oak Lane #213

City Houston	State TX	Zip Code 77024
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer St. Paul's Umc	Occupation Minister
------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4230019

Amount of Each Receipt this Period
 10.00

B. Gail Williford
Full Name (Last, First, Middle Initial)

Mailing Address 357 N Post Oak Lane #213

City Houston	State TX	Zip Code 77024
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer St. Paul's Umc	Occupation Minister
------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014

Transaction ID : 4240220

Amount of Each Receipt this Period
 10.00

C. Gail Williford
Full Name (Last, First, Middle Initial)

Mailing Address 357 N Post Oak Lane #213

City Houston	State TX	Zip Code 77024
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer St. Paul's Umc	Occupation Minister
------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4229444

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	35.00
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 1824 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Gail Williford
 Full Name (Last, First, Middle Initial)
 Mailing Address 357 N Post Oak Lane #213
 City Houston State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Paul's Umc Occupation Minister
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242418
 Amount of Each Receipt this Period
 15.00

B. Mr. Robert E. Willis
 Full Name (Last, First, Middle Initial)
 Mailing Address 3500 Highland Rd.
 City Roswell State NM Zip Code 88201
 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 ▼ 308.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4242720
 Amount of Each Receipt this Period
 60.00

C. Ms. Annis I. Willis
 Full Name (Last, First, Middle Initial)
 Mailing Address 2600 Old South Court
 City Jonesboro State GA Zip Code 30236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : 4233181
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 1825 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Kathryn A. Willmore
 Full Name (Last, First, Middle Initial)
 Mailing Address 154 West Canton Street
 City Boston State MA Zip Code 02118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation None
 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
 12 / 19 / 2014
Transaction ID : 4239043
 Amount of Each Receipt this Period
 100.00

B. Ms. Dina S. Willner
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 Vreeland Court
 City Mahwah State NJ Zip Code 07430
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232100
 Amount of Each Receipt this Period
 50.00

C. Ms. Amy Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1833 E Applebury Dr.
 City Fayetteville State AR Zip Code 72701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Beaver Water District Occupation Public Affairs Director
 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
 12 / 03 / 2014
Transaction ID : 4231497
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 1826 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Emma Wilson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2014
Mailing Address 1036 Broadhead Rd.		Transaction ID : 4238002
City Waxahachie	State TX	Zip Code 75165
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 200.00
Name of Employer Ennis Isd	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Ms. Nancy Cedar Wilson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2014
Mailing Address 620 River Rd		Transaction ID : 4237077
City Bethesda	State MD	Zip Code 20817
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 10.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.16	

Full Name (Last, First, Middle Initial) C. Ms. Carolyn Wilson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014
Mailing Address 2070 Marrwood Drive		Transaction ID : 4229449
City Salt Lake City	State UT	Zip Code 84124
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 5.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional).....▶	215.00
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 1827 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Carolyn Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2070 Marrwood Drive
 City State Zip Code
 Salt Lake City UT 84124
 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 ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242421
 Amount of Each Receipt this Period
 5.00

B. Kristina Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 280 Devonwood Dr.
 City State Zip Code
 Atlanta GA 30328
 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
 12 / 31 / 2014
Transaction ID : 4243395
 Amount of Each Receipt this Period
 50.00

C. Nancy Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 314 Tramore Ct.
 City State Zip Code
 Sterling VA 20164
 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 ▼
 360.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241598
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 1828 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Rick Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 NE 137th St
 City State Zip Code
 Seattle WA 98125
 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 ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232041
 Amount of Each Receipt this Period
 25.00

B. Mr. Rick Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 NE 137th St
 City State Zip Code
 Seattle WA 98125
 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 ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4239044
 Amount of Each Receipt this Period
 25.00

C. Ms. Bickley M. Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 South Orlando Avenue
 #878
 City State Zip Code
 Maitland FL 32751
 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 ▼
 3310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : 4231435
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 1829 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Bickley M. Wilson		Date of Receipt
Mailing Address 1100 South Orlando Avenue #878		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Maitland	FL	32751
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4237278
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3310.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Patricia D. Wilson		Date of Receipt
Mailing Address 420 Bay Ave Apt 1409		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
Clearwater	FL	33756
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4242641
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="38.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="233.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Lana Wilson		Date of Receipt
Mailing Address 825 W. Calle Ranunculo		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Tucson	AZ	85704
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4229448
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="245.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1053.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1830 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Lana Wilson

Mailing Address 825 W. Calle Ranunculo

City Tucson State AZ Zip Code 85704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4242420

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Ms. Angene H. Wilson

Mailing Address 3424 Keithshire Way

City Lexington State KY Zip Code 40503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

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
 12 / 01 / 2014
Transaction ID : 4230888

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. Ms. Aletta T. Wilson

Mailing Address P.O.Box 1088

City Mesilla Park State NM Zip Code 88047

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

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 / 28 / 2014
Transaction ID : 4230207

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00

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 1831 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Aletta T. Wilson		Date of Receipt
Mailing Address P.O.Box 1088		M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014
City	State	Zip Code
Mesilla Park	NM	88047
FEC ID number of contributing federal political committee.		Transaction ID : 4244924
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		300.00
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		300.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Jack Wilson		Date of Receipt
Mailing Address 1347 N. Alta Vista Blvd., Apt. 14		M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2014
City	State	Zip Code
West Hollywood	CA	90046
FEC ID number of contributing federal political committee.		Transaction ID : 4229660
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		345.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Joyce M. Wilson		Date of Receipt
Mailing Address 3101 Glenview Avenue		M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2014
City	State	Zip Code
Austin	TX	78703
FEC ID number of contributing federal political committee.		Transaction ID : 4232466
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		30.00
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		360.00
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 1832 OF 2648
	<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)
EMILY's List

A. Ms. Rebecca V. Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 52 Coachlight Dr.
City Little Rock State AR Zip Code 72227
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 ▼ 400.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230887
Amount of Each Receipt this Period
100.00

B. Ms. Diane K. Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 33 Country Club Gate
City Pacific Grove State CA Zip Code 93950
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 ▼ 520.00

Date of Receipt
12 / 03 / 2014
Transaction ID : 4232166
Amount of Each Receipt this Period
45.00

C. Mr. John I. Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 5007 Dunwoody Trl.
City Raleigh State NC Zip Code 27606
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 ▼ 600.00

Date of Receipt
12 / 01 / 2014
Transaction ID : 4230890
Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 445.00
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 1833 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Andrea Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 150 Wildwood Dr
City Eatonton State GA Zip Code 31024
FEC ID number of contributing federal political committee. **C**
Name of Employer OFAH, LLC Occupation accountant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 17 / 2014
Transaction ID : 4237789
Amount of Each Receipt this Period
50.00

B. Ms. Anne Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 1216 Beall St.
City Sweetwater State TX Zip Code 79556
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 17 / 2014
Transaction ID : 4237716
Amount of Each Receipt this Period
15.00

C. David Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 207 Saint Mark's Square
City Philadelphia State PA Zip Code 19104
FEC ID number of contributing federal political committee. **C**
Name of Employer University Of Pennsylvania Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 01 / 2014
Transaction ID : 4230889
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.00
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 1834 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan D. Wiltshire		Date of Receipt
Mailing Address 2473 SW 50th Blvd		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Gainesville	FL	32608
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4234278
Name of Employer	Occupation	Amount of Each Receipt this Period
None	None	<input type="text" value="1200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2200.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. Richard Winchester		Date of Receipt
Mailing Address 445 Union School Rd.		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
Oxford	PA	19363
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4242528
Name of Employer	Occupation	Amount of Each Receipt this Period
Requested	Requested	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Mr. Robert F. Wing		Date of Receipt
Mailing Address 400 Lenappe Drive		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Columbus	OH	43214
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4233950
Name of Employer	Occupation	Amount of Each Receipt this Period
Ohio State University	Astronomer	<input type="text" value="75.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="385.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1375.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1835 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Cheryl Wingate		Date of Receipt 12 / 03 / 2014 Transaction ID : 4232167
Mailing Address PO Box 1339		Amount of Each Receipt this Period 50.00
City Milledgeville	State GA	Zip Code 31059
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) B. Ms. Wendy K Wingfield		Date of Receipt 12 / 20 / 2014 Transaction ID : 4239330
Mailing Address 525 NE 37th St		Amount of Each Receipt this Period 50.00
City Boca Raton	State FL	Zip Code 33431
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Us Gas & Electric	Occupation Project Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Suzanne Winick		Date of Receipt 11 / 26 / 2014 Transaction ID : 4228191
Mailing Address 11335 Lisbon Rd		Amount of Each Receipt this Period 15.00
City Salem	State OH	Zip Code 44460
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1035.00	

SUBTOTAL of Receipts This Page (optional).....▶	115.00
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 1836 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Suzanne Winick		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4228190
Mailing Address 11335 Lisbon Rd		Amount of Each Receipt this Period 35.00
City Salem	State OH	Zip Code 44460
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1035.00	

Full Name (Last, First, Middle Initial) B. Ms. June Keener Wink		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2014 Transaction ID : 4231266
Mailing Address 155 Sandisfield Rd.		Amount of Each Receipt this Period 100.00
City Sandisfield	State MA	Zip Code 01255
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 ▼ 335.00	

Full Name (Last, First, Middle Initial) C. Barbara Winokur		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229451
Mailing Address 50 Belmont Avenue		Amount of Each Receipt this Period 30.00
City Bala Cynwyd	State PA	Zip Code 19004
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 ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	165.00
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 1837 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Barbara Winokur		Date of Receipt
Mailing Address 50 Belmont Avenue		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bala Cynwyd	PA	19004
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4242422
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="300.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="375.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Karen Winslow		Date of Receipt
Mailing Address 25 Winsor Place		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Glen Ridge	NJ	07028
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4230188
Name of Employer Self		Amount of Each Receipt this Period
Occupation Wife/Mother		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="1200.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Karen Winslow		Date of Receipt
Mailing Address 25 Winsor Place		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Glen Ridge	NJ	07028
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4240861
Name of Employer Self		Amount of Each Receipt this Period
Occupation Wife/Mother		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="1200.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="230.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1838 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Diane Winslow		Date of Receipt
Mailing Address 7201 Maple Ave.		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chevy Chase	MD	20815
FEC ID number of contributing federal political committee.		Transaction ID : 4232678
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="240.00"/>
Name of Employer Requested	Occupation Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Ann H. Winterling		Date of Receipt
Mailing Address 149 E Side Dr # 124		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Concord	NH	03301
FEC ID number of contributing federal political committee.		Transaction ID : 4230112
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer Requested	Occupation Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Ann H. Winterling		Date of Receipt
Mailing Address 149 E Side Dr # 124		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
Concord	NH	03301
FEC ID number of contributing federal political committee.		Transaction ID : 4240740
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer Requested	Occupation Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1839 OF 2648
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Janet Wisbaum		Date of Receipt
Mailing Address 180 Greenaway Road		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Amherst	NY	14226
FEC ID number of contributing federal political committee.		Transaction ID : 4230891
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
None	Homemaker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Louella-Jean Wiseman		Date of Receipt
Mailing Address 2657 Cowley Way		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
San Diego	CA	92110
FEC ID number of contributing federal political committee.		Transaction ID : 4233517
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="8.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="259.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Judith Wishnia		Date of Receipt
Mailing Address 3 Quincy Ct.		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Setauket	NY	11733
FEC ID number of contributing federal political committee.		Transaction ID : 4227457
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="325.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="208.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1840 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carole J Witt		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2014 Transaction ID : 4240223
Mailing Address 402 Harrison Place		Amount of Each Receipt this Period 25.00
City Ambler	State PA	Zip Code 19002
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 325.00	
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Nancy Witt		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2014 Transaction ID : 4239047
Mailing Address 1168 Devonshire Dr.		Amount of Each Receipt this Period 15.00
City San Diego	State CA	Zip Code 92107
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 355.00	
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Lois Witt		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2014 Transaction ID : 4233756
Mailing Address 3757 Gracie Pl.		Amount of Each Receipt this Period 25.00
City Longview	State WA	Zip Code 98632
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 381.00	
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 1841 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mrs. Victoria B Witte

Mailing Address 4 Glen Rd

City State Zip Code
Saint Louis MO 63119

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : 4232154

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Ms. Connie Wittig

Mailing Address 19612 N. 36th Place

City State Zip Code
Phoenix AZ 85050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229454

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Ms. Connie Wittig

Mailing Address 19612 N. 36th Place

City State Zip Code
Phoenix AZ 85050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 29 / 2014
Transaction ID : 4229501

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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 1842 OF 2648
	<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)
EMILY's List

A. Ms. Connie Wittig
Full Name (Last, First, Middle Initial)
Mailing Address 19612 N. 36th Place

City Phoenix	State AZ	Zip Code 85050
-----------------	-------------	-------------------

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 ▼
445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	10	/	2014

Transaction ID : 4234552

Amount of Each Receipt this Period
15.00

B. Cayla Wittig
Full Name (Last, First, Middle Initial)
Mailing Address 748 Nogales Dr.

City Henderson	State NV	Zip Code 89014
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Lewis Brisbois Bisgaard & Smith Llp	Occupation Attorney
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

Transaction ID : 4229993

Amount of Each Receipt this Period
10.00

C. Cayla Wittig
Full Name (Last, First, Middle Initial)
Mailing Address 748 Nogales Dr.

City Henderson	State NV	Zip Code 89014
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Lewis Brisbois Bisgaard & Smith Llp	Occupation Attorney
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	26	/	2014

Transaction ID : 4240618

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	35.00
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 1843 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Susan Woelzl
 Full Name (Last, First, Middle Initial)
 Mailing Address 128 Headley Terr
 City Irvington State NJ Zip Code 07111
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236881
 Amount of Each Receipt this Period
 500.00

B. Mr. Craig F. Woempner
 Full Name (Last, First, Middle Initial)
 Mailing Address 3816 Birch Street
 City San Diego State CA Zip Code 92113
 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 ▼ 266.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : 4232649
 Amount of Each Receipt this Period
 50.00

C. Mrs. Joan P. Wohl
 Full Name (Last, First, Middle Initial)
 Mailing Address 1919 Chestnut St., Apt. 2109
 City Philadelphia State PA Zip Code 19103
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230893
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	650.00
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 1844 OF 2648
	(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)
EMILY's List

A. Mrs. Joan P. Wohl
Full Name (Last, First, Middle Initial)

Mailing Address 1919 Chestnut St., Apt. 2109

City Philadelphia	State PA	Zip Code 19103
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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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	29	/	2014

Transaction ID : 4242644

Amount of Each Receipt this Period
100.00

B. Cynthia Wohlberg
Full Name (Last, First, Middle Initial)

Mailing Address 3567 Multiview Dr.

City Los Angeles	State CA	Zip Code 90068
---------------------	-------------	-------------------

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 ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2014

Transaction ID : 4239337

Amount of Each Receipt this Period
40.00

C. Mathew Wolf
Full Name (Last, First, Middle Initial)

Mailing Address 711 Louisiana Street, Suite 1660

City Houston	State TX	Zip Code 77002
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

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
12	/	29	/	2014

Transaction ID : 4242878

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....▶	440.00
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 1845 OF 2648
	<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)
EMILY's List

A. Julia Wolf
Full Name (Last, First, Middle Initial)

Mailing Address 4325 Willowbend Blvd

City Houston State TX Zip Code 77035

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Marriage And Family Therapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 4229456

Amount of Each Receipt this Period
 25.00

B. Julia Wolf
Full Name (Last, First, Middle Initial)

Mailing Address 4325 Willowbend Blvd

City Houston State TX Zip Code 77035

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Marriage And Family Therapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2014

Transaction ID : 4242425

Amount of Each Receipt this Period
 25.00

C. Ms. Ann Wolfe
Full Name (Last, First, Middle Initial)

Mailing Address 18 North Chester

City Baltimore State MD Zip Code 21231

FEC ID number of contributing federal political committee. **C**

Name of Employer Right Management Occupation Requested

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
 12 / 12 / 2014

Transaction ID : 4236010

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 1846 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Phil Wolfe
 Full Name (Last, First, Middle Initial)
 Mailing Address 2007 E. Superior St.
 City Duluth State MN Zip Code 55812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Trucker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : 4229457
 Amount of Each Receipt this Period
 50.00

B. Phil Wolfe
 Full Name (Last, First, Middle Initial)
 Mailing Address 2007 E. Superior St.
 City Duluth State MN Zip Code 55812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Trucker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2014
Transaction ID : 4241826
 Amount of Each Receipt this Period
 50.00

C. Ms. Barbara Wolff-Reichert
 Full Name (Last, First, Middle Initial)
 Mailing Address 45 Penhurst Park
 City Buffalo State NY Zip Code 14222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Teachspin Occupation Marketing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : 4232205
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 1847 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Charlotte S. Wollheim		Date of Receipt 12 / 08 / 2014 Transaction ID : 4233081
Mailing Address 155 Aloha St. Apt. 302		Amount of Each Receipt this Period 100.00
City Seattle	State WA	Zip Code 98109
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Marion S. Wollmeringer		Date of Receipt 12 / 23 / 2014 Transaction ID : 4240224
Mailing Address 1 Lyman St Apt 326		Amount of Each Receipt this Period 20.00
City Westborough	State MA	Zip Code 01581
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 394.00	

Full Name (Last, First, Middle Initial) C. Margaret Wolszon		Date of Receipt 12 / 19 / 2014 Transaction ID : 4239049
Mailing Address 705 SE 58th		Amount of Each Receipt this Period 25.00
City Port	State OR	Zip Code 97215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Self	Occupation Counselor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1325.00	

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 1848 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rega Wood		Date of Receipt 12 / 19 / 2014 Transaction ID : 4239052
Mailing Address 3310 Thomas Dr.		Amount of Each Receipt this Period 20.00
City Palo Alto	State CA	Zip Code 94303
FEC ID number of contributing federal political committee. C		
Name of Employer Indiana University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Ms. Lorraine Demorest Wood		Date of Receipt 12 / 13 / 2014 Transaction ID : 4236369
Mailing Address 3520 Eagle Bluff Dr, NE		Amount of Each Receipt this Period 10.00
City Grand Rapods	State MI	Zip Code 49525
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.00	

Full Name (Last, First, Middle Initial) C. Ms. Lorraine Demorest Wood		Date of Receipt 12 / 18 / 2014 Transaction ID : 4238152
Mailing Address 3520 Eagle Bluff Dr, NE		Amount of Each Receipt this Period 15.00
City Grand Rapods	State MI	Zip Code 49525
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.00	

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 1849 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Judy Wood		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236612
Mailing Address 5078 Oakhaven Lane		Amount of Each Receipt this Period 5.00
City Monroe	State MI	Zip Code 48161
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 272.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. Judy Wood		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2014 Transaction ID : 4228194
Mailing Address 5078 Oakhaven Lane		Amount of Each Receipt this Period 10.00
City Monroe	State MI	Zip Code 48161
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 272.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C. Judy Wood		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2014 Transaction ID : 4236640
Mailing Address 5078 Oakhaven Lane		Amount of Each Receipt this Period 10.00
City Monroe	State MI	Zip Code 48161
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 272.00
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	25.00
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 1850 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Judy Wood
 Full Name (Last, First, Middle Initial)
 Mailing Address 5078 Oakhaven Lane
 City State Zip Code
 Monroe MI 48161
 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 ▼
 272.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240587
 Amount of Each Receipt this Period
 10.00

B. Judy Wood
 Full Name (Last, First, Middle Initial)
 Mailing Address 5078 Oakhaven Lane
 City State Zip Code
 Monroe MI 48161
 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 ▼
 272.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229763
 Amount of Each Receipt this Period
 15.00

C. Judy Wood
 Full Name (Last, First, Middle Initial)
 Mailing Address 5078 Oakhaven Lane
 City State Zip Code
 Monroe MI 48161
 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 ▼
 272.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : 4239051
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00
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 1851 OF 2648
	<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)
EMILY's List

A. Judy Wood
Full Name (Last, First, Middle Initial)
Mailing Address 5078 Oakhaven Lane

City Monroe	State MI	Zip Code 48161
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
272.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	23	/	2014

Transaction ID : 4240225

Amount of Each Receipt this Period
15.00

B. Mary J. Wood
Full Name (Last, First, Middle Initial)
Mailing Address 55 Broad Street #255a

City San Luis Obispo	State CA	Zip Code 93405
-------------------------	-------------	-------------------

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 ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	10	/	2014

Transaction ID : 4234545

Amount of Each Receipt this Period
20.00

C. Mr. Hubert Wood
Full Name (Last, First, Middle Initial)
Mailing Address 1706 Regent Rd W

City Tifton	State GA	Zip Code 31793
----------------	-------------	-------------------

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 ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	05	/	2014

Transaction ID : 4232660

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 1852 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Annabella Wood
Full Name (Last, First, Middle Initial)
Mailing Address 154 Evergreen Ct.
City Blue Bell State PA Zip Code 19422
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Handy Woman
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 30 / 2014
Transaction ID : 4229591
Amount of Each Receipt this Period 25.00

B. Ms. Annabella Wood
Full Name (Last, First, Middle Initial)
Mailing Address 154 Evergreen Ct.
City Blue Bell State PA Zip Code 19422
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Handy Woman
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 28 / 2014
Transaction ID : 4241326
Amount of Each Receipt this Period 25.00

C. Ms. Elizabeth Wood
Full Name (Last, First, Middle Initial)
Mailing Address 5831 25th Ave. S
City Gulfport State FL Zip Code 33707
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Tax Practitioner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.36

Date of Receipt 12 / 05 / 2014
Transaction ID : 4232780
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 1853 OF 2648
	<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)
EMILY's List

A. Dr. Sharon Wooden
Full Name (Last, First, Middle Initial)
Mailing Address 4500 Big Sky Dr

City Las Cruces	State NM	Zip Code 88012
--------------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y
11	/	27	/	2014

Transaction ID : 4228230

Amount of Each Receipt this Period
10.00

B. Dr. Sharon Wooden
Full Name (Last, First, Middle Initial)
Mailing Address 4500 Big Sky Dr

City Las Cruces	State NM	Zip Code 88012
--------------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y
12	/	27	/	2014

Transaction ID : 4241099

Amount of Each Receipt this Period
10.00

C. Ellen Woodham-Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 3002 Thorndale Rd

City Indian Trail	State NC	Zip Code 28079
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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 ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	13	/	2014

Transaction ID : 4236370

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....	40.00
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 1854 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Cynthia Woolbright
 Full Name (Last, First, Middle Initial)
 Mailing Address 667 Midship Circle
 City State Zip Code
 Webster NY 14580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Woolbright Group Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4234913
 Amount of Each Receipt this Period
 85.00

B. Nonie Woolf
 Full Name (Last, First, Middle Initial)
 Mailing Address POB 1752
 City State Zip Code
 Browning MT 59417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None 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
 12 / 15 / 2014
Transaction ID : 4236662
 Amount of Each Receipt this Period
 10.00

C. Nonie Woolf
 Full Name (Last, First, Middle Initial)
 Mailing Address POB 1752
 City State Zip Code
 Browning MT 59417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None 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
 12 / 15 / 2014
Transaction ID : 4236663
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 1855 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Annie R. Worley

Mailing Address P.O. Box 507

City State Zip Code
Carbondale CO 81623

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 11 / 2014
Transaction ID : 4235147

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Frimal Worth

Mailing Address 644 Kismet Road

City State Zip Code
Philadelphia PA 19115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4230068

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
C. Frimal Worth

Mailing Address 644 Kismet Road

City State Zip Code
Philadelphia PA 19115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240227

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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 1856 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Frimal Worth		Date of Receipt
Mailing Address 644 Kismet Road		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Philadelphia	State PA	Zip Code 19115
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4229458
Name of Employer: None		Amount of Each Receipt this Period
Occupation: Retired		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="445.00"/>

Full Name (Last, First, Middle Initial) B. Frimal Worth		Date of Receipt
Mailing Address 644 Kismet Road		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Philadelphia	State PA	Zip Code 19115
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4241768
Name of Employer: None		Amount of Each Receipt this Period
Occupation: Retired		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="445.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Catherine Worth		Date of Receipt
Mailing Address 4008 Smith Ave SE		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City Albuquerque	State NM	Zip Code 87108
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4234711
Name of Employer: Worth Hearing Center		Amount of Each Receipt this Period
Occupation: Audiologist		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="425.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1857 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Lise Worthen-Chaudhari
 Full Name (Last, First, Middle Initial)
 Mailing Address 1421 Castleton Rd N
 City Columbus State OH Zip Code 43220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ohio State University Occupation Assistant Professor
 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 / 28 / 2014
Transaction ID : 4229459
 Amount of Each Receipt this Period
 25.00

B. Lise Worthen-Chaudhari
 Full Name (Last, First, Middle Initial)
 Mailing Address 1421 Castleton Rd N
 City Columbus State OH Zip Code 43220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ohio State University Occupation Assistant Professor
 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
 12 / 28 / 2014
Transaction ID : 4242426
 Amount of Each Receipt this Period
 25.00

C. Ms. Marilyn Worthley
 Full Name (Last, First, Middle Initial)
 Mailing Address 5933 E Wentworth St
 City Long Beach State CA Zip Code 90815
 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 ▼ 254.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : 4232234
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 1858 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. William B. Woyski		Date of Receipt
Mailing Address 3809 N Ave		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Anacortes	WA	98221
FEC ID number of contributing federal political committee.		Transaction ID : 4230896
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
Team Corporation	Engineer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Merle Wright		Date of Receipt
Mailing Address 8616 SW 9th Avenue		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Portland	OR	97219
FEC ID number of contributing federal political committee.		Transaction ID : 4237375
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
None	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="675.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Ruth M. Wright		Date of Receipt
Mailing Address 1440 High Street		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Boulder	CO	80304
FEC ID number of contributing federal political committee.		Transaction ID : 4227387
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	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1170.16"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
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: (check only one)	PAGE 1859 OF 2648
	<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)
EMILY's List

A. Ruth L. Wright
Full Name (Last, First, Middle Initial)

Mailing Address 1553 Professional Pkwy., Apt. 8

City Auburn	State AL	Zip Code 36830
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation University Faculty
--------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2014

Transaction ID : 4232064

Amount of Each Receipt this Period

30.00

B. Haviland Wright
Full Name (Last, First, Middle Initial)

Mailing Address 85 E India Rd

City Boston	State MA	Zip Code 02110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2014

Transaction ID : 4234863

Amount of Each Receipt this Period

25.00

C. Mr. Mrs. Philip and Carolyn Wyatt
Full Name (Last, First, Middle Initial)

Mailing Address 1675 Las Canoas Road

City Santa Barbara	State CA	Zip Code 93105
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WYATT Technology	Occupation CEO
--------------------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2014

Transaction ID : 4238348

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional).....▶	355.00
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 1860 OF 2648
	<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)
EMILY's List

A. Ms. Linda Yaffe
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 4820
 City Auburn State CA Zip Code 95604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Author
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : 4234384
 Amount of Each Receipt this Period
 100.00

B. Dr. Elaine Yarbrough
 Full Name (Last, First, Middle Initial)
 Mailing Address 3921 Niblick Ct
 City Longmont State CO Zip Code 80503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Yarbrough Group Occupation Consultant
 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
 11 / 30 / 2014
Transaction ID : 4229618
 Amount of Each Receipt this Period
 50.00

C. Dr. Elaine Yarbrough
 Full Name (Last, First, Middle Initial)
 Mailing Address 3921 Niblick Ct
 City Longmont State CO Zip Code 80503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Yarbrough Group Occupation Consultant
 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
 12 / 28 / 2014
Transaction ID : 4241274
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 1861 OF 2648
	<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)
EMILY's List

A. Ms. Phyllis Yarnold
Full Name (Last, First, Middle Initial)
Mailing Address 2412 Yorktown St., Apt. 280

City Houston	State TX	Zip Code 77056
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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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2014

Transaction ID : 4236500

Amount of Each Receipt this Period
45.00

B. Mr. John F. Yeaman
Full Name (Last, First, Middle Initial)
Mailing Address 15500 Wilmont Cove

City Austin	State TX	Zip Code 78717
----------------	-------------	-------------------

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 ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2014

Transaction ID : 4239339

Amount of Each Receipt this Period
25.00

C. Mr. Allan J. Yeast
Full Name (Last, First, Middle Initial)
Mailing Address 10481 E Battalion Dr

City Hereford	State AZ	Zip Code 85615
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation Requested
-------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2014

Transaction ID : 4232744

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 1862 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Frances Yeransian

Mailing Address 25 Robin St

City Pearl River State NY Zip Code 10965

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2014

Transaction ID : **4228342**

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Ms. Jean Yngve

Mailing Address 28 Crest Dr

City Chesterton State IN Zip Code 46304

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 ▼ **3251.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014

Transaction ID : **4237532**

Amount of Each Receipt this Period
375.00

Full Name (Last, First, Middle Initial)
C. Michael Yochum

Mailing Address 263 Laidley St.

City San Francisco State CA Zip Code 94131

FEC ID number of contributing federal political committee. **C**

Name of Employer Ubs Financial Services Occupation Financial Advisor

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
12 / 20 / 2014

Transaction ID : **4239236**

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	455.00
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 1863 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Sharon Yoh
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 Orchard Way
 City Wayne State PA Zip Code 19087
 Date of Receipt 12 / 08 / 2014
Transaction ID : 4233285
 Amount of Each Receipt this Period 200.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Self-Employed Occupation Residential Home Renovator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

B. Ms. Olga T. Yokoyama
 Full Name (Last, First, Middle Initial)
 Mailing Address 833 Malcolm Ave
 City Los Angeles State CA Zip Code 90024
 Date of Receipt 12 / 03 / 2014
Transaction ID : 4231994
 Amount of Each Receipt this Period 30.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Ucla Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1310.00

c. Ms. Olga T. Yokoyama
 Full Name (Last, First, Middle Initial)
 Mailing Address 833 Malcolm Ave
 City Los Angeles State CA Zip Code 90024
 Date of Receipt 12 / 19 / 2014
Transaction ID : 4244889
 Amount of Each Receipt this Period 75.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Ucla Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1310.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 305.00
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 1864 OF 2648
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Elizabeth York
Full Name (Last, First, Middle Initial)
Mailing Address 1577 forest villa lane
City McLean State VA Zip Code 22101
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
12 / 21 / 2014
Transaction ID : 4239378
Amount of Each Receipt this Period
1000.00

B. David Young
Full Name (Last, First, Middle Initial)
Mailing Address 3970 20th Street
City San Francisco State CA Zip Code 94114
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232643
Amount of Each Receipt this Period
100.00

C. Ms. Nancy Young
Full Name (Last, First, Middle Initial)
Mailing Address 1717 Ridge Ave #415
City Evanston State IL Zip Code 60201
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt
12 / 18 / 2014
Transaction ID : 4238153
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00
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 1865 OF 2648
	<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)
EMILY's List

A. Ms. Denise Lynn Young
Full Name (Last, First, Middle Initial)
Mailing Address 575 Highway A1a Apt 701

City Satellite Beach	State FL	Zip Code 32937
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236444
Amount of Each Receipt this Period
100.00

B. Ms. M. Hannah Young
Full Name (Last, First, Middle Initial)
Mailing Address 1609 W. Maple St.

City River Falls	State WI	Zip Code 54022
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
12 / 09 / 2014
Transaction ID : 4233836
Amount of Each Receipt this Period
100.00

C. Edward Ysseldyke
Full Name (Last, First, Middle Initial)
Mailing Address 14280 Beatrice Lane

City Leroy	State MI	Zip Code 49655
FEC ID number of contributing federal political committee. C		
Name of Employer Requested None	Occupation Requested Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Date of Receipt
12 / 13 / 2014
Transaction ID : 4236373
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 1866 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Constance Zack		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 28 / 2014 Transaction ID : 4229460
Mailing Address 320 Ives Rd		Amount of Each Receipt this Period 25.00
City East Greenwich	State RI	Zip Code 02818
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Constance Zack		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2014 Transaction ID : 4241602
Mailing Address 320 Ives Rd		Amount of Each Receipt this Period 25.00
City East Greenwich	State RI	Zip Code 02818
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Ms. Diane M. Zagrodny		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2014 Transaction ID : 4232369
Mailing Address 100 Sheridan Ave.		Amount of Each Receipt this Period 50.00
City Medford	State MA	Zip Code 02155
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 ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 1868 OF 2648
	<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)
EMILY's List

A. Jan Zaitlin , Ph.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 245 Berkeley Park Blvd.
 City Kensington State CA Zip Code 94707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2014
Transaction ID : 4229679
 Amount of Each Receipt this Period
 10.00

B. Jan Zaitlin , Ph.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 245 Berkeley Park Blvd.
 City Kensington State CA Zip Code 94707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 23 / 2014
Transaction ID : 4240233
 Amount of Each Receipt this Period
 10.00

C. Ms. Margot Zallen
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 18289
 City Golden State CO Zip Code 80402
 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 ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 30 / 2014
Transaction ID : 4243162
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	220.00
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 1869 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Val Zamora		Date of Receipt M M / D D / Y Y Y Y Y 12 / 27 / 2014 Transaction ID : 4240995
Mailing Address PO Box 16542		Amount of Each Receipt this Period 15.00
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1090.16	

Full Name (Last, First, Middle Initial) B. Val Zamora		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 4243552
Mailing Address PO Box 16542		Amount of Each Receipt this Period 15.00
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1090.16	

Full Name (Last, First, Middle Initial) C. Val Zamora		Date of Receipt M M / D D / Y Y Y Y Y 12 / 26 / 2014 Transaction ID : 4240873
Mailing Address PO Box 16542		Amount of Each Receipt this Period 25.00
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1090.16	

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 1870 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Stacy Zamudio		Date of Receipt
Mailing Address 493 Richmond Ave		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Maplewood	NJ	07040
FEC ID number of contributing federal political committee.		Transaction ID : 4232014
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Hackensack University Medical Center	Scientist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Doris Zanders		Date of Receipt
Mailing Address 551 E 1200 S # 205		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Heber City	UT	84032
FEC ID number of contributing federal political committee.		Transaction ID : 4234747
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="35.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="315.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Patricia L. Zane		Date of Receipt
Mailing Address 4200 Hillcrest		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
Warren	MI	48092
FEC ID number of contributing federal political committee.		Transaction ID : 4235449
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
Nlrb	Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="80.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1871 OF 2648
	<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)
EMILY's List

A. Ms. Ana-Maria V. Zaugg
Full Name (Last, First, Middle Initial)
Mailing Address 5280 Militia Hill Road
City Plymouth Mtng State PA Zip Code 19462
FEC ID number of contributing federal political committee. **C**
Name of Employer IMS Occupation Marketing Executive
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt **12 / 17 / 2014**
Transaction ID : 4237522
Amount of Each Receipt this Period **300.00**

B. Ms. Elaine Zavodny
Full Name (Last, First, Middle Initial)
Mailing Address 271 E. Ivanhoe St.
City Gilbert State AZ Zip Code 85295
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 **205.00**

Date of Receipt **12 / 15 / 2014**
Transaction ID : 4236668
Amount of Each Receipt this Period **15.00**

C. Ms. Bonita B. Zdrale
Full Name (Last, First, Middle Initial)
Mailing Address 1351 Silverwood Lane
City Neenah State WI Zip Code 54956
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 15 / 2014**
Transaction ID : 4244847
Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **340.00**
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 1872 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Danell Sher Zeavin		Date of Receipt
Mailing Address 22 Banbury Dr.		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
San Francisco	CA	94132
FEC ID number of contributing federal political committee.		Transaction ID : 4235174
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Adrienne Zeigler		Date of Receipt
Mailing Address 1808 John St.		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Manhattan Beach	CA	90266
FEC ID number of contributing federal political committee.		Transaction ID : 4229463
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="650.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Mary T. Zeis		Date of Receipt
Mailing Address 1193 Saxonburg Blvd		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
Glenshaw	PA	15116
FEC ID number of contributing federal political committee.		Transaction ID : 4230899
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="500.00"/>
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: (check only one)	PAGE 1873 OF 2648
	<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)
EMILY's List

A. Ms. Paula H. Zeitlin
Full Name (Last, First, Middle Initial)

Mailing Address 43 Tarleton Road

City Newton State MA Zip Code 02459

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Musician, Music Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2014

Transaction ID : 4244898

Amount of Each Receipt this Period
 20.00

B. Milbrey Zellej
Full Name (Last, First, Middle Initial)

Mailing Address Box 2

City Copake Falls State NY Zip Code 12517

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014

Transaction ID : 4231966

Amount of Each Receipt this Period
 25.00

C. Ms. Andrea E Zelman
Full Name (Last, First, Middle Initial)

Mailing Address 3033 W. Asbury Place

City Tampa State FL Zip Code 33611

FEC ID number of contributing federal political committee. **C**

Name of Employer Fowler White Boggs P.A. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014

Transaction ID : 4227300

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	295.00
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 1874 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Andrea E Zelman		Date of Receipt 12 / 15 / 2014 Transaction ID : 4236566
Mailing Address 3033 W. Asbury Place		Amount of Each Receipt this Period 250.00
City Tampa	State FL	Zip Code 33611
FEC ID number of contributing federal political committee. C		
Name of Employer Fowler White Boggs P.A.	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Linda Zenick		Date of Receipt 12 / 09 / 2014 Transaction ID : 4233841
Mailing Address 5500 Friendship Blvd Apt N1522		Amount of Each Receipt this Period 100.00
City Chevy Chase	State MD	Zip Code 20815
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Ms. Barbara Zentz		Date of Receipt 11 / 28 / 2014 Transaction ID : 4229464
Mailing Address 23208 7th Ave SE		Amount of Each Receipt this Period 10.00
City Bothell	State WA	Zip Code 98021
FEC ID number of contributing federal political committee. C		
Name of Employer Home Healthcare	Occupation Pt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

SUBTOTAL of Receipts This Page (optional).....▶	360.00
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 1875 OF 2648
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Zentz		Date of Receipt
Mailing Address 23208 7th Ave SE		<input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bothell	WA	98021
FEC ID number of contributing federal political committee.		Transaction ID : 4241670
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
Home Healthcare	Pt	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="305.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Barbara Zentz		Date of Receipt
Mailing Address 23208 7th Ave SE		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bothell	WA	98021
FEC ID number of contributing federal political committee.		Transaction ID : 4239059
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer	Occupation	
Home Healthcare	Pt	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="305.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. George Zidbeck		Date of Receipt
Mailing Address 1869 San Fernando Rd		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
Atascadero	CA	93422
FEC ID number of contributing federal political committee.		Transaction ID : 4239176
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="265.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="35.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1876 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ann Mae Zielinski		Date of Receipt
Mailing Address 714 Hill Ave.		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Endicott	State NY	Zip Code 13760
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4227416
Name of Employer None		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="240.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="240.00"/>		

Full Name (Last, First, Middle Initial) B. Amy Ziering		Date of Receipt
Mailing Address 16633 Ventura Blvd, Suite 1010		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City Encino	State CA	Zip Code 90049
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4236986
Name of Employer self		Amount of Each Receipt this Period
Occupation Producer		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="500.00"/>		

Full Name (Last, First, Middle Initial) C. Ms. Christina M Zimbaro		Date of Receipt
Mailing Address 25 Montclair Terrace		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City San Francisco	State CA	Zip Code 94109
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 4236045
Name of Employer None		Amount of Each Receipt this Period
Occupation None		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="1100.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="320.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 1877 OF 2648
	<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)
EMILY's List

A. Serge Zimberoff
Full Name (Last, First, Middle Initial)
Mailing Address 2517 Farrier Ct
City Santa Rosa State CA Zip Code 95401
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 ▼ 1135.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 12 / 2014
Transaction ID : 4235882
Amount of Each Receipt this Period
35.00

B. Ms. Deborah Zimmer
Full Name (Last, First, Middle Initial)
Mailing Address 648 Kirk Glen Drive
City San Jose State CA Zip Code 95133
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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 28 / 2014
Transaction ID : 4229465
Amount of Each Receipt this Period
30.00

C. Ms. Deborah Zimmer
Full Name (Last, First, Middle Initial)
Mailing Address 648 Kirk Glen Drive
City San Jose State CA Zip Code 95133
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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2014
Transaction ID : 4241770
Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 1878 OF 2648
	<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)
EMILY's List

A. Ms. Ann Zimmer
Full Name (Last, First, Middle Initial)
Mailing Address 612 Bull Run
City Staunton State VA Zip Code 24401
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 ▼ 375.00

Date of Receipt
12 / 05 / 2014
Transaction ID : 4232931
Amount of Each Receipt this Period
25.00

B. T. G. Zimmerman
Full Name (Last, First, Middle Initial)
Mailing Address 1450 Jefferson St.
City San Francisco State CA Zip Code 94123
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 385.00

Date of Receipt
12 / 12 / 2014
Transaction ID : 4235230
Amount of Each Receipt this Period
35.00

C. Dr. Steven M. Zimmet
Full Name (Last, First, Middle Initial)
Mailing Address 1631 Addux Lane
City McLean State VA Zip Code 22101
FEC ID number of contributing federal political committee. **C**
Name of Employer Pma Of Nva, Ltd Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
12 / 29 / 2014
Transaction ID : 4242473
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 310.00
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 1879 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Karen L Zink

Mailing Address 259 County Road 216

City Durango State CO Zip Code 81303

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwest Women's Health Occupation Nurse Practitioner

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
12 / 03 / 2014

Transaction ID : 4231869

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Laura Zito

Mailing Address 250 East 31st St

City New York State NY Zip Code 10016

FEC ID number of contributing federal political committee. **C**

Name of Employer Crush Wines Occupation Sommelier

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 4229466

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Laura Zito

Mailing Address 250 East 31st St

City New York State NY Zip Code 10016

FEC ID number of contributing federal political committee. **C**

Name of Employer Crush Wines Occupation Sommelier

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014

Transaction ID : 4242429

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **125.00**

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 1880 OF 2648
	(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)
EMILY's List

A. Ginna Zoellner
Full Name (Last, First, Middle Initial)

Mailing Address 900 Reichert Ave Unit 302

City Novato State CA Zip Code 94945

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : 4237808

Amount of Each Receipt this Period
35.00

B. Ms. Shirley E. Zubowicz
Full Name (Last, First, Middle Initial)

Mailing Address 20613 High Park Road

City Cedaredge State CO Zip Code 81413

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **281.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : 4230903

Amount of Each Receipt this Period
35.00

C. Ms. Arline Zuckerman
Full Name (Last, First, Middle Initial)

Mailing Address 11315 Victoria Ave

City Los Angeles State CA Zip Code 90066

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 ▼ **565.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : 4240296

Amount of Each Receipt this Period
226.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **296.00**

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 1881 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Wallace Zuckerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2465 Black Rock Tpke
 City State Zip Code
 Fairfield CT 06825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Wallace Zuckerman, CPA Office Manager
 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
 12 / 01 / 2014
Transaction ID : 4230904
 Amount of Each Receipt this Period
 100.00

B. Mary Zupanc , M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 228 S Calle Grande
 City State Zip Code
 Orange CA 92869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pediatric Subspecialty Faculty Physician
 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
 12 / 30 / 2014
Transaction ID : 4243121
 Amount of Each Receipt this Period
 300.00

C. Ms. Pamela Zwehl-Burke
 Full Name (Last, First, Middle Initial)
 Mailing Address 522 W Victoria St Apt B
 City State Zip Code
 Santa Barbara CA 93101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 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
 12 / 11 / 2014
Transaction ID : 4235048
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00
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 1882 OF 2648
	<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)
EMILY's List

A. Ms. Elinor Zwerling
Full Name (Last, First, Middle Initial)
Mailing Address 13884 Degas Dr. E.
City West Palm Bch State FL Zip Code 33410
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 ▼
700.00

Date of Receipt
12 / 29 / 2014
Transaction ID : 4242527
Amount of Each Receipt this Period
200.00

B. Gail D. Zwiebel
Full Name (Last, First, Middle Initial)
Mailing Address 5311 E. Hinsdale Ct.
City Centennial State CO Zip Code 80122
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
The Zwiebel Center For Plastic Surgery Book-Keeping Supervisor
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 / 16 / 2014
Transaction ID : 4237129
Amount of Each Receipt this Period
25.00

C. Ms. Jane E. Foote
Full Name (Last, First, Middle Initial)
Mailing Address 40503 Village Wood Rd
City Novi State MI Zip Code 48375
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
University Of Michigan Health System It Manager
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
200.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 4236595
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... **275.00**
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 1883 OF 2648
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Full Name (Last, First, Middle Initial)
Ms. Jane E. Foote

Mailing Address 40503 Village Wood Rd

City State Zip Code
Novi MI 48375

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University Of Michigan Health System It Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 15 / 2014
Transaction ID : 4236596

Amount of Each Receipt this Period
 50.00

Brenda Lawrence Contributions

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 / D D / 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 / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	444198.05

**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 1884 OF 2648
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. American Women		Date of Receipt
Mailing Address 1800 M St NW Ste 375N		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 20261
Washington	DC	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="29150.00"/>
Name of Employer	Occupation	Polling Expenses
Receipt For:	Aggregate Year-to-Date ▼	Orig Vendor: Anzalone Liszt Grove Research
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="0.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Print Mail Communications		Date of Receipt
Mailing Address 4333 Davenport Rd		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 20262
Fredericksburg	VA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="1792.99"/>
Name of Employer	Occupation	Postage Refund
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="0.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Caroline Fines		Date of Receipt
Mailing Address 10621 Regent Park Ct		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Transaction ID : 20264
Fairfax	VA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="1.17"/>
Name of Employer	Occupation	Postage at Fair Market Value
Receipt For:	Aggregate Year-to-Date ▼	Orig Vendor: Purchase Power
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="0.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="30944.16"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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 1885 OF 2648
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kate Watt		Date of Receipt 12 / 15 / 2014 Transaction ID : 20265
Mailing Address 1425 4th St SW Apt A217		Amount of Each Receipt this Period 0.48
City Washington	State DC	Zip Code 20024
FEC ID number of contributing federal political committee. C		Postage at Fair Market Value
Name of Employer	Occupation	Orig Vendor: Purchase Power
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Denise Feriozzi		Date of Receipt 12 / 15 / 2014 Transaction ID : 20266
Mailing Address 1363 E St SE		Amount of Each Receipt this Period 0.69
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C		Postage at Fair Market Value
Name of Employer	Occupation	Orig Vendor: Purchase Power
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Catherine Black		Date of Receipt 12 / 15 / 2014 Transaction ID : 20267
Mailing Address 1811 Wyoming Ave NW Apt 1		Amount of Each Receipt this Period 10.36
City Washington	State DC	Zip Code 20009
FEC ID number of contributing federal political committee. C		Postage at Fair Market Value
Name of Employer	Occupation	Orig Vendor: Purchase Power
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional).....▶	11.53
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 1886 OF 2648
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Sarah Pierz

Mailing Address 925 25th St NW
Apt 316

City Washington State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 20268

Amount of Each Receipt this Period
40.00

Telephone at Fair Market Value

Orig Vendor: Verizon

Full Name (Last, First, Middle Initial)
B. Eric Smith

Mailing Address 130 M St NE
Apt 413

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 20269

Amount of Each Receipt this Period
211.00

Telephone at Fair Market Value

Orig Vendor: Verizon

Full Name (Last, First, Middle Initial)
C. Jessica Byrd

Mailing Address 626 S St NW
Apt 303

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 15 / 2014
Transaction ID : 20270

Amount of Each Receipt this Period
149.00

Telephone at Fair Market Value

Orig Vendor: Verizon

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 1887 OF 2648
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ashley Lough

Mailing Address 326 F Street, NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 30 / 2014

Transaction ID : 50000

Amount of Each Receipt this Period
148.46

Travel at Fair Market Value

Orig Vendor: American Express

Full Name (Last, First, Middle Initial)
B. Priyanka Mantha

Mailing Address 3314 Mt. Pleasant St NW Apt 37

City Washington State DC Zip Code 20010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 30 / 2014

Transaction ID : 50001

Amount of Each Receipt this Period
1.47

Telephone at Fair Market Value

Orig Vendor: Verizon

Full Name (Last, First, Middle Initial)
C. Muthoni Wambu Kraal

Mailing Address 1215 Dexter Ave N Apt 636

City Seattle State WA Zip Code 98109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 30 / 2014

Transaction ID : 50002

Amount of Each Receipt this Period
6.97

Telephone at Fair Market Value

Orig Vendor: Verizon

SUBTOTAL of Receipts This Page (optional).....▶	156.90
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 1888 OF 2648
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Louisa Farley

Mailing Address 1701 16th St NW
Apt 721

City Washington State DC Zip Code 20009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 30 / 2014
Transaction ID : 50003

Amount of Each Receipt this Period
6.18

Telephone at Fair Market Value

Orig Vendor: Verizon

Full Name (Last, First, Middle Initial)
B. Hannah Truslow

Mailing Address 809 6th St NW
Apt 52

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 30 / 2014
Transaction ID : 50004

Amount of Each Receipt this Period
11.00

Travel at Fair Market Value

Orig Vendor: American Express

Full Name (Last, First, Middle Initial)
C. Armfield Harrison & Thomas Inc

Mailing Address 20 South King St

City Leesburg State VA Zip Code 20175

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 04 / 2015
Transaction ID : 20263

Amount of Each Receipt this Period
83.00

Insurance Refund

SUBTOTAL of Receipts This Page (optional).....▶	100.18
TOTAL This Period (last page this line number only).....▶	31612.77

**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 1889 OF 2648
<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Receipt M M M / D D D / Y Y Y Y Y 11 / 30 / 2014 Transaction ID : 11002
Mailing Address 1501 Pennsylvania St NW		Amount of Each Receipt this Period 4.81
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Interest
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.54	

Full Name (Last, First, Middle Initial) B. Merrill Lynch		Date of Receipt M M M / D D D / Y Y Y Y Y 11 / 30 / 2014 Transaction ID : 11003
Mailing Address 1152 15th St NW		Amount of Each Receipt this Period 0.62
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Dividend
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6.18	

Full Name (Last, First, Middle Initial) C. Bank of America		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 14 / 2014 Transaction ID : 11006
Mailing Address 1501 Pennsylvania St NW		Amount of Each Receipt this Period 3.25
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Interest
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.48	

SUBTOTAL of Receipts This Page (optional).....▶	8.68
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 1890 OF 2648
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 11004
Mailing Address 1501 Pennsylvania St NW		Amount of Each Receipt this Period 19.08
City Washington State DC Zip Code 20005	FEC ID number of contributing federal political committee. C	Interest
Name of Employer Occupation	Aggregate Year-to-Date ▼ 228.54	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Merrill Lynch		Date of Receipt M M M / D D D / Y Y Y Y Y 12 / 31 / 2014 Transaction ID : 11005
Mailing Address 1152 15th St NW		Amount of Each Receipt this Period 0.74
City Washington State DC Zip Code 20005	FEC ID number of contributing federal political committee. C	Dividend
Name of Employer Occupation	Aggregate Year-to-Date ▼ 6.18	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M M / D D D / Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City State Zip Code	FEC ID number of contributing federal political committee. C	
Name of Employer Occupation	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	19.82
TOTAL This Period (last page this line number only).....▶	28.50

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Care First Blue Cross Blue Sheild

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245299

Amount of Each Disbursement this Period

37428.00

Full Name (Last, First, Middle Initial)

B. Chapman Cubine Adams Hussey

Mailing Address 2000 15th Street North
Ste 550

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Design/Graphics

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245300

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Chapman Cubine Adams Hussey

Mailing Address 2000 15th Street North
Ste 550

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Design/Graphics

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245301

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

47428.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Cogent Communications, Inc.

Mailing Address P.O. Box 791087

City Baltimore State MD Zip Code 21279-1087

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245302

Amount of Each Disbursement this Period

2100.00

Full Name (Last, First, Middle Initial)

B. Engage, LLC

Mailing Address 550 Highland St
Suite 403

City Frederick State MD Zip Code 21701

Purpose of Disbursement
Contribution Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245303

Amount of Each Disbursement this Period

4847.69

Full Name (Last, First, Middle Initial)

C. Engage, LLC

Mailing Address 550 Highland St
Suite 403

City Frederick State MD Zip Code 21701

Purpose of Disbursement
Contribution Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245304

Amount of Each Disbursement this Period

103.14

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7050.83

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Engage, LLC

Mailing Address 550 Highland St
Suite 403

City Frederick State MD Zip Code 21701

Purpose of Disbursement
Contribution Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245305

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Engage, LLC

Mailing Address 550 Highland St
Suite 403

City Frederick State MD Zip Code 21701

Purpose of Disbursement
Contribution Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245306

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Engage, LLC

Mailing Address 550 Highland St
Suite 403

City Frederick State MD Zip Code 21701

Purpose of Disbursement
Contribution Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245307

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Ray Keating

Mailing Address 816 Lucky Rd

City State Zip Code
Severn MD 21144

Purpose of Disbursement
Internet Services

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
11			25			2014			

Transaction ID : SB21B-245309

Amount of Each Disbursement this Period

39.99

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address PO Box 25505

City State Zip Code
Lehigh Valley PA 18002-5505

Purpose of Disbursement
Internet Services

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
11			25			2014			

Transaction ID : SB21B-245309-10000

Amount of Each Disbursement this Period

39.99

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Alison McQuade

Mailing Address 320 23rd Street South
#1526

City State Zip Code
Arlington VA 22202

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245311

Amount of Each Disbursement this Period

41.62

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

81.61

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Metro Data Networks, LLC c/o Hamilton-Ryker IT Solutions/MDN

Mailing Address PO Box 1068

City State Zip Code
Martin TN 38237

Purpose of Disbursement
Consulting Fundraising

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
11 / 25 / 2014

Transaction ID : SB21B-245312

Amount of Each Disbursement this Period

7043.92

Full Name (Last, First, Middle Initial)

B. Hilary Nachem

Mailing Address 1216 D St SE #2

City State Zip Code
Washington DC 20003

Purpose of Disbursement
Telephone

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
11 / 25 / 2014

Transaction ID : SB21B-245313

Amount of Each Disbursement this Period

50.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. Sprint PCS

Mailing Address P.O. Box 62071

City State Zip Code
Baltimore MD 21264-2071

Purpose of Disbursement
Telephone

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
11 / 25 / 2014

Transaction ID : SB21B-245313-10000

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7093.92

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NGP VAN, Inc

Mailing Address 1101 15th Street, NW
Ste 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245314

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Perkins Coie Attn: Client Accounting

Mailing Address 1201 Third Avenue, 49th Floor

City Seattle State WA Zip Code 98101

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245316

Amount of Each Disbursement this Period

1836.00

Full Name (Last, First, Middle Initial)

C. Jessica Post

Mailing Address 107 E Maple

City Alexandria State VA Zip Code 22301

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245317

Amount of Each Disbursement this Period

26.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4862.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Prudential

Mailing Address PO Box 101241

City Atlanta State GA Zip Code 30392-1241

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2014			

Transaction ID : SB21B-245318

Amount of Each Disbursement this Period

3006.67

Full Name (Last, First, Middle Initial)

B. GE Capital C/O RICOH USA PROGRAM

Mailing Address PO Box 41564

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement
Equipment Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2014			

Transaction ID : SB21B-245319

Amount of Each Disbursement this Period

2143.58

Full Name (Last, First, Middle Initial)

C. Safeguard Shredding Attn: Accounts Receivable

Mailing Address PO Box 3219

City Oakton State VA Zip Code 22124

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2014			

Transaction ID : SB21B-245320

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5200.25

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245322

Amount of Each Disbursement this Period

20.51

Full Name (Last, First, Middle Initial)

B. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245323

Amount of Each Disbursement this Period

546.93

Full Name (Last, First, Middle Initial)

C. Leigh Warren

Mailing Address 3023 S Columbus St

City Arlington State VA Zip Code 22206

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245324

Amount of Each Disbursement this Period

99.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

666.44

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326

Amount of Each Disbursement this Period

2581.46

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-10000

Amount of Each Disbursement this Period

30.35

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SOCIALE

Mailing Address 3665 SACRAMEN

City SAN FRANCISCO State CA Zip Code 94118-1709

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-20000

Amount of Each Disbursement this Period

77.54

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2581.46

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SB21B-245326-30000

Amount of Each Disbursement this Period

2.12

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SB21B-245326-40000

Amount of Each Disbursement this Period

4.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SB21B-245326-50000

Amount of Each Disbursement this Period

55.30

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SQUARE

Mailing Address ST 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-60000

Amount of Each Disbursement this Period

53.16

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 1300 FILLMORE

Mailing Address 1300 FILLMORE

City SAN FRANCISCO State CA Zip Code 94115-4113

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-70000

Amount of Each Disbursement this Period

65.29

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HILTON SAN FRANCISCO F&B

Mailing Address 333 OFARRELL

City SAN FRANCISCO State CA Zip Code 94102-2116

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-80000

Amount of Each Disbursement this Period

9.79

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-90000

Amount of Each Disbursement this Period

7.06

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PERRYS

Mailing Address SAN FRANCISCO

City SAN FRANCISCO State CA Zip Code 94128

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-10000

Amount of Each Disbursement this Period

18.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. JOHN'S GRILL

Mailing Address 63 ELLIS ST

City SAN FRANCISCO State CA Zip Code 94102-2207

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-110000

Amount of Each Disbursement this Period

64.18

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VTS SAN FRANCISCO

Mailing Address VTS SAN FRAN C

City State Zip Code
LONG ISLAND C NY 11101-3502

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-120000

Amount of Each Disbursement this Period

51.72

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TRAVEL TRADERS #701

Mailing Address 333 OFARRELL

City State Zip Code
SAN FRANCISCO CA 94102-2116

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-130000

Amount of Each Disbursement this Period

6.98

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SBARROS B CONC 003227310

Mailing Address SEA-TAC INT'L

City State Zip Code
SEATTLE WA 98158

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-140000

Amount of Each Disbursement this Period

3.60

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-150000

Amount of Each Disbursement this Period

39.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-160000

Amount of Each Disbursement this Period

33.43

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ALASKA AIRLINES IN FLIGHT

Mailing Address 20833 INTERNA

City SEATTLE State WA Zip Code 98198-5950

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-170000

Amount of Each Disbursement this Period

6.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. THE RIALTO CAFE

Mailing Address 934 16TH ST

City DENVER State CO Zip Code 80202-2902

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-180000

Amount of Each Disbursement this Period

52.28

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. THE RIALTO CAFE

Mailing Address 934 16TH ST

City DENVER State CO Zip Code 80202-2902

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-190000

Amount of Each Disbursement this Period

121.52

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. METRO TAXI

Mailing Address 5909 E 38TH A

City DENVER State CO Zip Code 80207-1252

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-200000

Amount of Each Disbursement this Period

4.85

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-210000

Amount of Each Disbursement this Period

14.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SHERATON DENVER DOWNTOWN

Mailing Address 1550 COURT PL

City DENVER State CO Zip Code 80202-5107

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-220000

Amount of Each Disbursement this Period

33.62

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. YARD HOUSE 8329

Mailing Address 1555 COURT PL

City DENVER State CO Zip Code 80202

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-230000

Amount of Each Disbursement this Period

127.14

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. BENT FORK GRILL AURORA		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address 12191 E. ILIF		Transaction ID : SB21B-245326-240000
City AURORA	State CO	
Zip Code 80014	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 102.24
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. SQUARE		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address ST 600		Transaction ID : SB21B-245326-250000
City SAN FRANCISCO	State CA	
Zip Code 94103	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 62.16
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DAPHNE'S BOULDER 1077		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address STE 1248		Transaction ID : SB21B-245326-260000
City BOULDER	State CO	
Zip Code 80301	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 8.97
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. PANERA BREAD 3062

Mailing Address 12293 E ILIFF

City State Zip Code
AURORA CO 80014-6378

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245326-270000

Amount of Each Disbursement this Period

7.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AVIS RENT A CAR CORP

Mailing Address SEND ALL MAIL

City State Zip Code
GARDEN CITY NY 11530

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245326-280000

Amount of Each Disbursement this Period

279.16

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. KFC - PIZZA HUT

Mailing Address CONCORDS A

City State Zip Code
DENVER CO 80249-6363

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245326-290000

Amount of Each Disbursement this Period

8.65

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. BAR LOUIE WESTMINSTER		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address 10661 WESTMIN		Transaction ID : SB21B-245326-300000
City BROOMFIELD	State CO	
Zip Code 80020-4166	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 49.44
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address 1455 MARKET S		Transaction ID : SB21B-245326-310000
City SAN FRANCISCO	State CA	
Zip Code 94103	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 8.97
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ALASKA AIRLINES IN FLIGHT		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address 20833 INTERNA		Transaction ID : SB21B-245326-320000
City SEATTLE	State WA	
Zip Code 98198-5950	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 6.00
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HYATT REGENCY CONV CTR

Mailing Address 650 15TH ST

City DENVER State CO Zip Code 80202

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-330000

Amount of Each Disbursement this Period

101.64

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HYATT REGENCY CONV CTR

Mailing Address 650 15TH ST

City DENVER State CO Zip Code 80202

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-340000

Amount of Each Disbursement this Period

3.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-350000

Amount of Each Disbursement this Period

12.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-360000

Amount of Each Disbursement this Period

6	.	5	6
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ARAMARK WASH ST CONV CTR

Mailing Address 800 CONVENTIO

City State Zip Code
SEATTLE WA 98101-2350

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-370000

Amount of Each Disbursement this Period

4	6	.	5
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-380000

Amount of Each Disbursement this Period

8	.	8	9
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[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-390000

Amount of Each Disbursement this Period

30.41

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CAT CORAS KITCHEN

Mailing Address 776 N TERMINA

City State Zip Code
SALT LAKE CIT UT 84122-7003

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-400000

Amount of Each Disbursement this Period

7.22

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ANTNDANTHNYSEXP003227856

Mailing Address SEA-TAC INT'L

City State Zip Code
SEATTLE WA 98158

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-410000

Amount of Each Disbursement this Period

6.56

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GREEK SOUVLAKI MAIN 32322

Mailing Address SALT LAKE CTY

City SALT LAKE CIT State UT Zip Code 84122

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SB21B-245326-420000

Amount of Each Disbursement this Period

3.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SB21B-245326-430000

Amount of Each Disbursement this Period

100.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 8924

Mailing Address HWY 550 & NM

City BERNALILLO State NM Zip Code 87004

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SB21B-245326-440000

Amount of Each Disbursement this Period

6.64

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-450000

Amount of Each Disbursement this Period

72.63

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HYATT REGENCY ALBUQUERQUE

Mailing Address 330 TIJERAS N

City ALBUQUERQUE State NM Zip Code 87102

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-460000

Amount of Each Disbursement this Period

7.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTEL ANDALUZ

Mailing Address 125 2ND ST NW

City ALBUQUERQUE State NM Zip Code 87102

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-470000

Amount of Each Disbursement this Period

90.37

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-480000

Amount of Each Disbursement this Period

30.76

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AVIS RENT A CAR CORP

Mailing Address SEND ALL MAIL

City GARDEN CITY State NY Zip Code 11530

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-490000

Amount of Each Disbursement this Period

289.08

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ZINC WINE BAR & BISTRO

Mailing Address 3009 CENTRAL

City ALBUQUERQUE State NM Zip Code 87106-2214

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-500000

Amount of Each Disbursement this Period

36.50

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-510000

Amount of Each Disbursement this Period

5.86									
------	--	--	--	--	--	--	--	--	--

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GALLO BLANCO

Mailing Address 401 W CLAREND

City PHOENIX State AZ Zip Code 85013

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-520000

Amount of Each Disbursement this Period

48.62									
-------	--	--	--	--	--	--	--	--	--

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SQUARE

Mailing Address ST 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-530000

Amount of Each Disbursement this Period

57.00									
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[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00									
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TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. THE VIG

Mailing Address 608 N 4TH AVE

City PHOENIX State AZ Zip Code 85003

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-540000

Amount of Each Disbursement this Period

40.37

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CAFE AT PHOENIX PUBLIC MA

Mailing Address 14 E PIERCE S

City PHOENIX State AZ Zip Code 85004

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-550000

Amount of Each Disbursement this Period

6.42

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HYATT REGENCY

Mailing Address 330 TIJERAS N

City ALBUQUERQUE State NM Zip Code 87102

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-560000

Amount of Each Disbursement this Period

141.01

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. COMIDA BUENA

Mailing Address 2200 SUNPORT

City ALBUQUERQUE State NM Zip Code 87106

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245326-570000

Amount of Each Disbursement this Period

5.65

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327

Amount of Each Disbursement this Period

9353.39

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. DRYBAR

Mailing Address 123 KEARNY ST

City SAN FRANCISCO State CA Zip Code 94108

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-10000

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9353.39

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DRYBAR

Mailing Address 123 KEARNY ST

City State Zip Code
SAN FRANCISCO CA 94108

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-20000

Amount of Each Disbursement this Period

7.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 5404

Mailing Address GEARY & TAYLO

City State Zip Code
SAN FRANCISCO CA 94102

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-30000

Amount of Each Disbursement this Period

6.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UNITED ELEC TICKETNG

Mailing Address 600 JEFFERSON

City State Zip Code
HOUSTON TX 77002-7324

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-40000

Amount of Each Disbursement this Period

316.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES

Mailing Address DEPT HQJ-CM

City HOUSTON State TX Zip Code 77002-7363

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-50000

Amount of Each Disbursement this Period

43.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-60000

Amount of Each Disbursement this Period

11.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOUSTON TRANSPORTATION

Mailing Address 5825 KELLEY S

City HOUSTON State TX Zip Code 77026-1901

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-70000

Amount of Each Disbursement this Period

62.04

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES

Mailing Address DEPT HQJ-CM

City HOUSTON State TX Zip Code 77002-7363

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 25 / 2014

Transaction ID : **SB21B-245327-80000**

Amount of Each Disbursement this Period: 65.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address DEPT HQJ-CM

City HOUSTON State TX Zip Code 77002-7363

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 25 / 2014

Transaction ID : **SB21B-245327-90000**

Amount of Each Disbursement this Period: 75.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address DEPT HQJ-CM

City HOUSTON State TX Zip Code 77002-7363

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 25 / 2014

Transaction ID : **SB21B-245327-100000**

Amount of Each Disbursement this Period: 69.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-110000

Amount of Each Disbursement this Period

564.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. OTH/MISC

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-120000

Amount of Each Disbursement this Period

21.65

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTEL ICON AUTO COL

Mailing Address 220 MAIN ST

City HOUSTON State TX Zip Code 77002-1706

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-130000

Amount of Each Disbursement this Period

74.90

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. DUNKIN DONUTS/BASKIN ROBB		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address 7800 AIRPORT		Transaction ID : SB21B-245327-140000
City HOUSTON State TX Zip Code 77061-4145	Amount of Each Disbursement this Period 5.97	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. GOGOAIR		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address 303 S TECHNOL		Transaction ID : SB21B-245327-150000
City BROOMFIELD State CO Zip Code 80021-3411	Amount of Each Disbursement this Period 44.95	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. FRONTIER AIRLINES		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address 7001 TOWER RD		Transaction ID : SB21B-245327-160000
City DENVER State CO Zip Code 80249-7312	Amount of Each Disbursement this Period 30.00	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FRONTIER AIRLINES

Mailing Address 7001 TOWER RD

City DENVER State CO Zip Code 80249-7312

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-170000

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. COLORADO CAB COMPANY

Mailing Address 7500 E 41ST A

City DENVER State CO Zip Code 80216-4706

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-180000

Amount of Each Disbursement this Period

67.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. COLORADO CAB COMPANY

Mailing Address 7500 E 41ST A

City DENVER State CO Zip Code 80216-4706

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-190000

Amount of Each Disbursement this Period

70.80

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. OTG DCA VENTURE II, LLC

Mailing Address RNL D RGN WA N

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245327-200000

Amount of Each Disbursement this Period

9	9	0
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SPIRIT A/L DIRECT SALES

Mailing Address 18121 E 8 MIL

City EASTPOINTE State MI Zip Code 48021-3241

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245327-210000

Amount of Each Disbursement this Period

4	5	0
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SPIRIT A/L DIRECT SALES

Mailing Address 18121 E 8 MIL

City EASTPOINTE State MI Zip Code 48021-3241

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245327-220000

Amount of Each Disbursement this Period

2	0	9
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[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0	0	0
---	---	---

TOTAL This Period (last page this line number only)..... ▶

0	0	0
---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245327-230000

Amount of Each Disbursement this Period

420.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245327-240000

Amount of Each Disbursement this Period

22.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245327-250000

Amount of Each Disbursement this Period

426.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DC VIP CAB

Mailing Address 2606 BLADENSB

City WASHINGTON State DC Zip Code 20018-1423

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-260000

Amount of Each Disbursement this Period

27.97

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-270000

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-280000

Amount of Each Disbursement this Period

426.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. LEXINGTON HOTEL AUTO COL

Mailing Address 511 LEXINGTON

City NEW YORK State NY Zip Code 10017-2017

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-290000

Amount of Each Disbursement this Period

446.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. VIRGIN AM TKT SALES

Mailing Address 555 AIRPORT B

City BURLINGAME State CA Zip Code 94010-2036

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-300000

Amount of Each Disbursement this Period

75.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UNITED ELEC TICKETNG

Mailing Address 600 JEFFERSON

City HOUSTON State TX Zip Code 77002-7324

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-310000

Amount of Each Disbursement this Period

591.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245327-320000

Amount of Each Disbursement this Period

12.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SQUARE

Mailing Address ST 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245327-330000

Amount of Each Disbursement this Period

56.29

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WOLPACK LESSEE LLC

Mailing Address 1100 FIFTH AV

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245327-340000

Amount of Each Disbursement this Period

229.85

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CIBO BISTRO WINE AND BAR

Mailing Address US AIRWAYS TE

City FLUSHING State NY Zip Code 11371

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-350000

Amount of Each Disbursement this Period

6.29

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TAXI CHARGE -DC

Mailing Address 465 UTICA AVE

City BROOKLYN State NY Zip Code 11203

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-360000

Amount of Each Disbursement this Period

21.07

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CIBO BISTRO WINE AND BAR

Mailing Address US AIRWAYS TE

City FLUSHING State NY Zip Code 11371

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-370000

Amount of Each Disbursement this Period

7.69

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MARK PAYPAL

Mailing Address 2145 HAMILTON

City State Zip Code
SAN JOSE CA 95125-5905

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245327-380000

Amount of Each Disbursement this Period

750.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City State Zip Code
ATLANTA GA 30344

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245327-390000

Amount of Each Disbursement this Period

361.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BOQUERIA

Mailing Address 1837 M ST NW

City State Zip Code
WASHINGTON DC 20036-2552

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245327-400000

Amount of Each Disbursement this Period

14.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-410000

Amount of Each Disbursement this Period

672.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. YELLOW CAB 328

Mailing Address 1636 BLADENSB

City WASHINGTON State DC Zip Code 20002-1889

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-420000

Amount of Each Disbursement this Period

11.69

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UNITED ELEC TICKETNG

Mailing Address 600 JEFFERSON

City HOUSTON State TX Zip Code 77002-7324

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-430000

Amount of Each Disbursement this Period

53.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES

Mailing Address DEPT HQJ-CM

City HOUSTON State TX Zip Code 77002-7363

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-440000

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. S AND S MAINTENANCE CORP

Mailing Address 518 W 44TH ST

City NEW YORK State NY Zip Code 10036-3425

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-450000

Amount of Each Disbursement this Period

69.38

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. THE KINGSIDE

Mailing Address 124 WEST 57TH

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-460000

Amount of Each Disbursement this Period

136.05

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. USPG LLC

Mailing Address 30 MASSACHUSE

City WASHINGTON State DC Zip Code 20002-4225

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-470000

Amount of Each Disbursement this Period

14.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-480000

Amount of Each Disbursement this Period

333.74

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SINGH CAR SERVICE

Mailing Address 10640 JOHN AY

City FAIRFAX State VA Zip Code 22032

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-490000

Amount of Each Disbursement this Period

85.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DRYBAR SAN FRANCISCO

Mailing Address 1908 FILLMORE

City SAN FRANCISCO State CA Zip Code 94115-2707

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-500000

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. KABUKI HOTEL

Mailing Address 1625 POST STR

City SAN FRANCISCO State CA Zip Code 94115

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-510000

Amount of Each Disbursement this Period

621.38

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NAPA FARMS MARKET

Mailing Address DOMESTIC TERM

City SAN FRANCISCO State CA Zip Code 94128

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-520000

Amount of Each Disbursement this Period

15.30

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. DELTA AIR LINES

Mailing Address DEPT 680 1030

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 25 / 2014

Transaction ID : **SB21B-245327-530000**

Amount of Each Disbursement this Period: 79.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
B. JOHNNY

Mailing Address 6800 FLEUR DR

City DES MOINES State IA Zip Code 50321-3127

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 25 / 2014

Transaction ID : **SB21B-245327-540000**

Amount of Each Disbursement this Period: 134.18

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
C. WOLPACK LESSEE LLC

Mailing Address 1100 FIFTH AV

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 25 / 2014

Transaction ID : **SB21B-245327-550000**

Amount of Each Disbursement this Period: 31.28

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WOLPACK LESSEE LLC

Mailing Address 1100 FIFTH AV

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-560000

Amount of Each Disbursement this Period

3.83

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TERRA PLATA

Mailing Address 1501 MELROSE

City SEATTLE State WA Zip Code 98122-3607

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-570000

Amount of Each Disbursement this Period

378.64

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CASA DEL AGAVE 003227055

Mailing Address SEA-TAC INT'L

City SEATTLE State WA Zip Code 98158

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-580000

Amount of Each Disbursement this Period

15.05

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. JOHNNY

Mailing Address 6800 FLEUR DR

City DES MOINES State IA Zip Code 50321-3127

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-590000

Amount of Each Disbursement this Period

23.06

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-600000

Amount of Each Disbursement this Period

185.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-610000

Amount of Each Disbursement this Period

31.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-620000

Amount of Each Disbursement this Period

22.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-630000

Amount of Each Disbursement this Period

200.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245327-640000

Amount of Each Disbursement this Period

200.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245327-650000

Amount of Each Disbursement this Period

185.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Publication & Dues

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
11 / 25 / 2014

Transaction ID : SB21B-245328

Amount of Each Disbursement this Period

165.34

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. JRNL SENT CIRC

Mailing Address 333 W STATE S

City MILWAUKEE State WI Zip Code 53203-1305

Purpose of Disbursement
Publication & Dues

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
11 / 25 / 2014

Transaction ID : SB21B-245328-10000

Amount of Each Disbursement this Period

8.62

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

165.34

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TIME MAGAZINE

Mailing Address 3000 UNIVERSI

City TAMPA State FL Zip Code 33612-6400

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245328-50000

Amount of Each Disbursement this Period

8	5	.	6	0
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WASHINGTON POST DIGITAL S

Mailing Address 1150 15 ST NW

City WASHINGTON State DC Zip Code 20071-0001

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245328-60000

Amount of Each Disbursement this Period

1	5	.	8	6
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245329

Amount of Each Disbursement this Period

7	7	.	3	1
---	---	---	---	---

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7	7	.	3	1
---	---	---	---	---

7	7	.	3	1
---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CITITAXI FUNDING LLC

Mailing Address 5411 QUEENS B

City State Zip Code
WOODSIDE NY 11377-4642

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245329-40000

Amount of Each Disbursement this Period

51.54

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ZARO'S BAKE SHOP

Mailing Address 2 PENN PLAZA

City State Zip Code
NEW YORK NY 10001

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245329-50000

Amount of Each Disbursement this Period

11.38

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. TAXI CHARGE -DC

Mailing Address 465 UTICA AVE

City State Zip Code
BROOKLYN NY 11203

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245329-60000

Amount of Each Disbursement this Period

17.21

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VOICE RESTAURANT AUTO COL

Mailing Address 220 MAIN ST

City HOUSTON State TX Zip Code 77002-1706

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245329-70000

Amount of Each Disbursement this Period

18.14

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STATE LIMOUSINE SVCS

Mailing Address 1001 TEXAS ST

City HOUSTON State TX Zip Code 77002-3182

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245329-80000

Amount of Each Disbursement this Period

78.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTEL ICON AUTO COL

Mailing Address 220 MAIN ST

City HOUSTON State TX Zip Code 77002-1706

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245329-90000

Amount of Each Disbursement this Period

12.74

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. OTH/MISC

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245329-10000

Amount of Each Disbursement this Period

29.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HOUSTON TAXI & LIMOUSINE

Mailing Address 11731 BERRY M

City HOUSTON State TX Zip Code 77071

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245329-110000

Amount of Each Disbursement this Period

67.25

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AMTRAK.COM

Mailing Address 60 MASSACHUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245329-120000

Amount of Each Disbursement this Period

395.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO BOX 36611

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245329-130000

Amount of Each Disbursement this Period

39.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City State Zip Code
Fort Lauderdale FL 33336

Purpose of Disbursement
Office Supplies Expenses

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
11			25			2014			

Transaction ID : SB21B-245330

Amount of Each Disbursement this Period

17.84

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. WALGREEN 03464

Mailing Address 3402 N CENTRA

City State Zip Code
PHOENIX AZ 85012-2202

Purpose of Disbursement
Office Supplies Expenses

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
11			25			2014			

Transaction ID : SB21B-245330-10000

Amount of Each Disbursement this Period

17.84

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

17.84

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. THE GROVE - DC

Mailing Address WASHINGTON RE

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245331-60000

Amount of Each Disbursement this Period

3	.	7	2
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CREATIVE MOBILE TECHNOLOG

Mailing Address 4250 24TH ST

City LONG ISLAND C State NY Zip Code 11101-4608

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245331-70000

Amount of Each Disbursement this Period

1	8	.	0	5
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245331-80000

Amount of Each Disbursement this Period

1	1	.	0	6
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[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
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0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245331-90000

Amount of Each Disbursement this Period

15.92

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ALEXANDRIA YELLOW CAB

Mailing Address 3014 COLVIN S

City ALEXANDRIA State VA Zip Code 22314-4544

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245331-10000

Amount of Each Disbursement this Period

24.48

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS C #150

Mailing Address 5501 JOSH BIR

City CHARLOTTE State NC Zip Code 28208-5750

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245331-110000

Amount of Each Disbursement this Period

2.38

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS INFLIGHT SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245331-120000

Amount of Each Disbursement this Period

8.39

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. NEWS 2 U

Mailing Address 5501 JOSH BUR

City CHARLOTTE State NC Zip Code 28208

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245331-130000

Amount of Each Disbursement this Period

8.67

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245331-140000

Amount of Each Disbursement this Period

13.98

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245331-150000

Amount of Each Disbursement this Period

16.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AU BON PAIN CAFE #54

Mailing Address 601 INDIANA A

City WASHINGTON State DC Zip Code 20004-2925

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245331-160000

Amount of Each Disbursement this Period

27.06

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BEAU THAI DC

Mailing Address 1700 NEW JERS

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245331-170000

Amount of Each Disbursement this Period

22.70

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NOOSHI

Mailing Address 1120 19TH ST

City WASHINGTON State DC Zip Code 20036-3686

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245331-180000

Amount of Each Disbursement this Period

24.02

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245331-190000

Amount of Each Disbursement this Period

9.76

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245331-200000

Amount of Each Disbursement this Period

12.68

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245331-210000

Amount of Each Disbursement this Period

464.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245331-220000

Amount of Each Disbursement this Period

177.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. EXXONMOBIL INSIDE SALES

Mailing Address CUST SVC 1 80

City KANSAS CITY State MO Zip Code 64141

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245331-230000

Amount of Each Disbursement this Period

11.78

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AVIS.COM

Mailing Address 300 CENTRE PO

City VIRGINIA BEAC State VA Zip Code 23462-4415

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245331-240000

Amount of Each Disbursement this Period

427.72

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SUPERSHUTTLE BWI

Mailing Address LOWER LEVEL P

City BALTIMORE State MD Zip Code 21240

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245331-250000

Amount of Each Disbursement this Period

45.40

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GALLO BLANCO

Mailing Address 401 W CLAREND

City PHOENIX State AZ Zip Code 85013

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245331-260000

Amount of Each Disbursement this Period

48.61

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SWA INFLIGHT WIFI

Mailing Address 4353 PARK TER

City WESTLAKE VILL State CA Zip Code 91361-4631

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245331-270000

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS - B PEARL

Mailing Address BWI AIRPORT

City BALTIMORE State MD Zip Code 21240

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245331-280000

Amount of Each Disbursement this Period

4.64

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS - B PEARL

Mailing Address BWI AIRPORT

City BALTIMORE State MD Zip Code 21240

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245331-290000

Amount of Each Disbursement this Period

5.28

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CAFE AT PHOENIX PUBLIC MA

Mailing Address 14 E PIERCE S

City PHOENIX State AZ Zip Code 85004

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245331-300000

Amount of Each Disbursement this Period

26.47

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TRAVEL TRADERS #1065

Mailing Address 111 N CENTRAL

City PHOENIX State AZ Zip Code 85004-2308

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245331-310000

Amount of Each Disbursement this Period

7.91

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS T4 WEST LOBBY

Mailing Address 3400 E SKY HA

City PHOENIX State AZ Zip Code 85034-4404

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245331-320000

Amount of Each Disbursement this Period

5.09

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 6920

Mailing Address SPEEDWY & CNT

City TUCSON State AZ Zip Code 85716

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SB21B-245331-330000

Amount of Each Disbursement this Period

4.59

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STREETS DEPT IPS GROUP M

Mailing Address 305 W WASHING

City PHOENIX State AZ Zip Code 85003-2187

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SB21B-245331-340000

Amount of Each Disbursement this Period

1.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SB21B-245335

Amount of Each Disbursement this Period

881.59

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

881.59

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245335-10000

Amount of Each Disbursement this Period

613.59

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UNITED ELEC TICKETNG

Mailing Address 600 JEFFERSON

City HOUSTON State TX Zip Code 77002-7324

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245335-20000

Amount of Each Disbursement this Period

188.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UNITED ELEC TICKETNG

Mailing Address 600 JEFFERSON

City HOUSTON State TX Zip Code 77002-7324

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245335-30000

Amount of Each Disbursement this Period

79.90

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
Computer Services

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
11 / 25 / 2014

Transaction ID : SB21B-245343

Amount of Each Disbursement this Period

52.86

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Services

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
11 / 25 / 2014

Transaction ID : SB21B-245343-10000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
Computer Supplies/Hardware

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
11 / 25 / 2014

Transaction ID : SB21B-245344

Amount of Each Disbursement this Period

410.36

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

463.22

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TRIPIT INC.

Mailing Address 601 108TH AVE

City State Zip Code
BELLEVUE WA 98004

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245344-10000

Amount of Each Disbursement this Period

2	9	0	0
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AMAZON.COM LLC

Mailing Address 1516 2ND AVE

City State Zip Code
SEATTLE WA 98101-1543

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245344-20000

Amount of Each Disbursement this Period

6	4	2	0
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City State Zip Code
SEATTLE WA 98103-8882

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245344-30000

Amount of Each Disbursement this Period

5	2	8	6
---	---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0	0
---	---	---	---

0	0	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Supplies/Hardware

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
11			25			2014			

Transaction ID : SB21B-245344-40000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Supplies/Hardware

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
11			25			2014			

Transaction ID : SB21B-245344-50000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Supplies/Hardware

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
11			25			2014			

Transaction ID : SB21B-245344-60000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245344-70000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245344-80000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245345

Amount of Each Disbursement this Period

210.06

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

210.06

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STAPLES 1532

Mailing Address 1901 L ST NW

City WASHINGTON State DC Zip Code 20036-3509

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245345-10000

Amount of Each Disbursement this Period

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STAPLES 1532

Mailing Address 1901 L ST NW

City WASHINGTON State DC Zip Code 20036-3509

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245345-20000

Amount of Each Disbursement this Period

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245346

Amount of Each Disbursement this Period

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. VZWR LSS APOCC VISB		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address TWO VERIZON P		Transaction ID : SB21B-245346-10000
City ALPHARETTA	State GA	
Purpose of Disbursement Telephone	Candidate Name	Amount of Each Disbursement this Period 2003.73
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) B. VZWR LSS APOCC VISB		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address TWO VERIZON P		Transaction ID : SB21B-245346-20000
City ALPHARETTA	State GA	
Purpose of Disbursement Telephone	Candidate Name	Amount of Each Disbursement this Period 1041.88
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. ATT MOB RECURRING W		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address 208 S AKARD S		Transaction ID : SB21B-245346-30000
City DALLAS	State TX	
Purpose of Disbursement Telephone	Candidate Name	Amount of Each Disbursement this Period 1542.83
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
Furniture & Computer Equipment

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
11 / 25 / 2014

Transaction ID : SB21B-245347

Amount of Each Disbursement this Period

1618.84

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. WWW.BESTBUY.COM 994

Mailing Address 7075 FLYING C

City EDEN PRAIRIE State MN Zip Code 55344-3532

Purpose of Disbursement
Furniture & Computer Equipment

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
11 / 25 / 2014

Transaction ID : SB21B-245347-10000

Amount of Each Disbursement this Period

421.93

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AMAZON.COM LLC

Mailing Address 1516 2ND AVE

City SEATTLE State WA Zip Code 98101-1543

Purpose of Disbursement
Furniture & Computer Equipment

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
11 / 25 / 2014

Transaction ID : SB21B-245347-20000

Amount of Each Disbursement this Period

398.97

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1618.84

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AMAZON.COM LLC

Mailing Address 1516 2ND AVE

City SEATTLE State WA Zip Code 98101-1543

Purpose of Disbursement
Furniture & Computer Equipment

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
11 / 25 / 2014

Transaction ID : SB21B-245347-30000

Amount of Each Disbursement this Period

398.97

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AMAZON.COM LLC

Mailing Address 1516 2ND AVE

City SEATTLE State WA Zip Code 98101-1543

Purpose of Disbursement
Furniture & Computer Equipment

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
11 / 25 / 2014

Transaction ID : SB21B-245347-40000

Amount of Each Disbursement this Period

398.97

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245355

Amount of Each Disbursement this Period

11896.59

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

11896.59

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-10000

Amount of Each Disbursement this Period

225.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CAPITAL

Mailing Address 900 BRENTWOOD

City WASHINGTON State DC Zip Code 20066-9201

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-20000

Amount of Each Disbursement this Period

2.68

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS ARC SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-30000

Amount of Each Disbursement this Period

444.20

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-40000

Amount of Each Disbursement this Period

225.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HILTON GARDEN INN-MILW AR

Mailing Address 5890 S HOWELL

City MILWAUKEE State WI Zip Code 53207-6603

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-50000

Amount of Each Disbursement this Period

160.36

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HILTON GARDEN INN

Mailing Address 250 HASKELL R

City BANGOR State ME Zip Code 04401-4241

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-60000

Amount of Each Disbursement this Period

579.96

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DELTA AIR LINES

Mailing Address DEPT 680 1030

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-70000

Amount of Each Disbursement this Period

442.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HILTON/BOSTON WOBURN

Mailing Address 2 FORBES RD

City WOBURN State MA Zip Code 01801-2103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-80000

Amount of Each Disbursement this Period

491.38

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-90000

Amount of Each Disbursement this Period

338.20

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-10000

Amount of Each Disbursement this Period

691.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-110000

Amount of Each Disbursement this Period

702.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HAMPTON INN

Mailing Address 102 HAMPTON C

City PERRY State GA Zip Code 31069-2161

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-120000

Amount of Each Disbursement this Period

135.75

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-130000

Amount of Each Disbursement this Period

108.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-140000

Amount of Each Disbursement this Period

225.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-150000

Amount of Each Disbursement this Period

228.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS ARC SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-160000

Amount of Each Disbursement this Period

460.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-170000

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES

Mailing Address DEPT 680 1030

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-180000

Amount of Each Disbursement this Period

152.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245355-190000

Amount of Each Disbursement this Period

219.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245355-200000

Amount of Each Disbursement this Period

108.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245355-210000

Amount of Each Disbursement this Period

587.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HILTON GARDEN INN

Mailing Address 250 HASKELL R

City BANGOR State ME Zip Code 04401-4241

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-220000

Amount of Each Disbursement this Period

711.06

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-230000

Amount of Each Disbursement this Period

235.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PORTLAND HILTON GARDEN IN

Mailing Address 145 JETPORT B

City PORTLAND State ME Zip Code 04102

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-240000

Amount of Each Disbursement this Period

193.32

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TARGET T1890

Mailing Address 3500 EAST WES

City State Zip Code
HYATTSVILLE MD 20782-5003

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-250000

Amount of Each Disbursement this Period

9.48

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City State Zip Code
PHOENIX AZ 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-260000

Amount of Each Disbursement this Period

225.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PARTY CITY OF WHEATON

Mailing Address 11006 VIERS M

City State Zip Code
SILVER SPRING MD 20902

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-270000

Amount of Each Disbursement this Period

12.51

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DOUBLETREE BY HILTON HOTEL POR

Mailing Address 363 MAINE MAL

City SOUTH PORTLAN State ME Zip Code 04106-3214

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 25 / 2014

Transaction ID : **SB21B-245355-280000**

Amount of Each Disbursement this Period: 213.52

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES INC

Mailing Address AMERICAN AIRL

City TULSA State OK Zip Code 74133-1275

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 25 / 2014

Transaction ID : **SB21B-245355-290000**

Amount of Each Disbursement this Period: 570.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. TRAVELOCITY (US)

Mailing Address 333 108TH AVE

City BELLEVUE State WA Zip Code 98004-5736

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 25 / 2014

Transaction ID : **SB21B-245355-300000**

Amount of Each Disbursement this Period: 24.88

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS ARC SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245355-310000

Amount of Each Disbursement this Period

484.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DELTA AIR LINES

Mailing Address DEPT 680 1030

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245355-320000

Amount of Each Disbursement this Period

202.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245355-330000

Amount of Each Disbursement this Period

180.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-340000

Amount of Each Disbursement this Period

221.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-350000

Amount of Each Disbursement this Period

219.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-360000

Amount of Each Disbursement this Period

678.70

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. PANERA BREAD #3577

Mailing Address 8541 GEORGIA

City SILVER SPRING State MD Zip Code 20910-3402

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-370000

Amount of Each Disbursement this Period

7	.	4	0
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BOJANGLES

Mailing Address 5501 JOSH BIR

City CHARLOTTE State NC Zip Code 28208-5750

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-380000

Amount of Each Disbursement this Period

5	.	8	1
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HUDSON NEWS

Mailing Address 2401 SMITH BL

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-390000

Amount of Each Disbursement this Period

3	.	1	9
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[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WALMART SUPERCENTER

Mailing Address 702 SW 8TH ST

City BENTONVILLE State AR Zip Code 72716-6299

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245355-400000

Amount of Each Disbursement this Period

35.64

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. QUEEN CITY GIFTS & N

Mailing Address 4901 DWIGHT E

City CHARLOTTE State NC Zip Code 28217-1441

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245355-410000

Amount of Each Disbursement this Period

4.82

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. QUEEN CITY GIFTS & N

Mailing Address 4901 DWIGHT E

City CHARLOTTE State NC Zip Code 28217-1441

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245355-420000

Amount of Each Disbursement this Period

3.42

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS DIRECT SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-430000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CHICK-FIL-A 00485

Mailing Address 3905 N DRUID

City DECATUR State GA Zip Code 30033-3104

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-440000

Amount of Each Disbursement this Period

7.59

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BP FDMS INSIDE

Mailing Address 28100 TORCH P

City WARRENVILLE State IL Zip Code 60555-3938

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-450000

Amount of Each Disbursement this Period

7.68

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. M STARBUCKS BOOKS #151

Mailing Address 5501 JOSH BIR

City CHARLOTTE State NC Zip Code 28208-5750

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245355-460000

Amount of Each Disbursement this Period

2	.	6	0
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CHICK-FIL-A 00250

Mailing Address 4400 ASHFORD

City ATLANTA State GA Zip Code 30346-1561

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245355-470000

Amount of Each Disbursement this Period

5	.	6	8
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PUBLIX 665

Mailing Address 3870 N DRUID

City DECATUR State GA Zip Code 30033-3002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245355-480000

Amount of Each Disbursement this Period

1	6	.	3	4
---	---	---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HILTON CENTER CITY

Mailing Address 222 E 3RD ST

City CHARLOTTE State NC Zip Code 28202-2315

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-490000

Amount of Each Disbursement this Period

635.83

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PUBLIX 665

Mailing Address 3870 N DRUID

City DECATUR State GA Zip Code 30033-3002

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-500000

Amount of Each Disbursement this Period

27.61

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CHICK-FIL-A 00485

Mailing Address 3905 N DRUID

City DECATUR State GA Zip Code 30033-3104

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245355-510000

Amount of Each Disbursement this Period

7.63

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CHICK-FIL-A 00485

Mailing Address 3905 N DRUID

City DECATUR State GA Zip Code 30033-3104

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245355-520000

Amount of Each Disbursement this Period

6.09

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BURGER KING #846

Mailing Address 2682 CANDLER

City DECATUR State GA Zip Code 30034

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245355-530000

Amount of Each Disbursement this Period

2.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HILTON GARDEN INN

Mailing Address 1330 BLAIRSTO

City TALLAHASSEE State FL Zip Code 32301-3068

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245355-540000

Amount of Each Disbursement this Period

156.38

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SHELL OIL

Mailing Address 12700 NORTHBO

City HOUSTON State TX Zip Code 77067-2552

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2014			

Transaction ID : SB21B-245355-550000

Amount of Each Disbursement this Period

25.51

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DAIRY QUEEN

Mailing Address 3680 FLAT SHO

City DECATUR State GA Zip Code 30034-1632

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2014			

Transaction ID : SB21B-245355-560000

Amount of Each Disbursement this Period

2.02

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2014			

Transaction ID : SB21B-245356

Amount of Each Disbursement this Period

86.71

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

86.71

--

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STAPLES #808

Mailing Address 2407 SE DELAW

City AUDUBON State IA Zip Code 50021-4470

Purpose of Disbursement
Office Supplies Expenses

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
11			25			2014			

Transaction ID : SB21B-245356-10000

Amount of Each Disbursement this Period

86.71

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Postage

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
11			25			2014			

Transaction ID : SB21B-245357

Amount of Each Disbursement this Period

72.01

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. CAPITAL

Mailing Address 900 BRENTWOOD

City WASHINGTON State DC Zip Code 20066-9201

Purpose of Disbursement
Postage

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
11			25			2014			

Transaction ID : SB21B-245357-10000

Amount of Each Disbursement this Period

72.01

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

72.01

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358

Amount of Each Disbursement this Period

6032.70

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-10000

Amount of Each Disbursement this Period

228.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address 1200 E ALGONQ

City ARLINGTON HEI State IL Zip Code 60005-4786

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-20000

Amount of Each Disbursement this Period

603.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6032.70

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245358-30000

Amount of Each Disbursement this Period

285.21

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES INC

Mailing Address AMERICAN AIRL

City TULSA State OK Zip Code 74133-1275

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245358-40000

Amount of Each Disbursement this Period

277.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ENTERPRISE R A C 163A

Mailing Address 2601 CALVERT

City WASHINGTON State DC Zip Code 20008-4106

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245358-50000

Amount of Each Disbursement this Period

18.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-60000

Amount of Each Disbursement this Period

24.17

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CARIBOU COFFEE #1289

Mailing Address 909 SE ORALAB

City AUDUBON State IA Zip Code 50021-4038

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-70000

Amount of Each Disbursement this Period

6.24

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GOLDCOAST LB ORD

Mailing Address BUILDING 6, O

City CHICAGO State IL Zip Code 60666

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-80000

Amount of Each Disbursement this Period

9.25

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-90000

Amount of Each Disbursement this Period

9.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ENTERPRISE R A C 163A

Mailing Address 2601 CALVERT

City WASHINGTON State DC Zip Code 20008-4106

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-10000

Amount of Each Disbursement this Period

4.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. THE GROVE - DC

Mailing Address WASHINGTON RE

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-110000

Amount of Each Disbursement this Period

2.52

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. POTBELLY SANDWCH WKS 137

Mailing Address RGN WASHINGTO

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-120000

Amount of Each Disbursement this Period

9.84

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WINDY CITY CARCVERS 20255

Mailing Address 10000 WEST O

City CHICAGO State IL Zip Code 60666

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-130000

Amount of Each Disbursement this Period

5.51

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-140000

Amount of Each Disbursement this Period

5.30

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. JIMMY JOHNS 1449

Mailing Address 202 SOUTH ANK

City AUDUBON State IA Zip Code 50023

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-150000

Amount of Each Disbursement this Period

22.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. COURTYARD-DESMOINES ANKNY

Mailing Address 2405 SE CREEK

City AUDUBON State IA Zip Code 50021-8800

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-160000

Amount of Each Disbursement this Period

16.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CARIBOU COFFEE #1289

Mailing Address 909 SE ORALAB

City AUDUBON State IA Zip Code 50021-4038

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-170000

Amount of Each Disbursement this Period

4.43

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DSM BERGIN FRUIT

Mailing Address DSM AIRPORT

City DES MOINES State IA Zip Code 50321

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-180000

Amount of Each Disbursement this Period

4.98

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ENTERPRISE RAC

Mailing Address DES MOINES AP

City DES MOINES State IA Zip Code 50321

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-190000

Amount of Each Disbursement this Period

75.15

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS H02 W/DELI ORD

Mailing Address BUILDING 6-O'

City CHICAGO State IL Zip Code 60666

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-200000

Amount of Each Disbursement this Period

5.47

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. REGGIO'S H/K ORD

Mailing Address BUILDING 6, O

City CHICAGO State IL Zip Code 60666

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-210000

Amount of Each Disbursement this Period

8.61

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-220000

Amount of Each Disbursement this Period

9.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CAPITAL

Mailing Address 900 BRENTWOOD

City WASHINGTON State DC Zip Code 20066-9201

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-230000

Amount of Each Disbursement this Period

106.12

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS ARC SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-240000

Amount of Each Disbursement this Period

199.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-250000

Amount of Each Disbursement this Period

130.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-260000

Amount of Each Disbursement this Period

61.47

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-270000

Amount of Each Disbursement this Period

308.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-280000

Amount of Each Disbursement this Period

132.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-290000

Amount of Each Disbursement this Period

408.87

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-300000

Amount of Each Disbursement this Period

506.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SHAKE SHACK 18TH ST NW

Mailing Address 1216 18TH ST

City WASHINGTON State DC Zip Code 20036-2540

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-310000

Amount of Each Disbursement this Period

26.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-320000

Amount of Each Disbursement this Period

136.60

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245358-330000

Amount of Each Disbursement this Period

210.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CAPITAL

Mailing Address 900 BRENTWOOD

City WASHINGTON State DC Zip Code 20066-9201

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245358-340000

Amount of Each Disbursement this Period

18.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245358-350000

Amount of Each Disbursement this Period

144.48

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-360000

Amount of Each Disbursement this Period

783.64

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-370000

Amount of Each Disbursement this Period

291.40

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NANDOS PERI PERI RESTAURA

Mailing Address 1210 18TH STR

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-380000

Amount of Each Disbursement this Period

37.73

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. ENTERPRISE R A C 163A		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address 2601 CALVERT		Transaction ID : SB21B-245358-390000
City WASHINGTON	State DC	
Zip Code 20008-4106	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 12.00
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. STARBUCKS 8462		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address CAPITAL BLVD.		Transaction ID : SB21B-245358-400000
City RALEIGH	State NC	
Zip Code 27604	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 3.72
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PEI WEI ASIAN DINER 0108		Date of Disbursement MM / DD / YYYY 11 / 25 / 2014
Mailing Address 10251 LITTLE		Transaction ID : SB21B-245358-410000
City RALEIGH	State NC	
Zip Code 27617	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 11.50
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CVS/PHARMACY #02471

Mailing Address 6840 GLENWOOD

City RALEIGH State NC Zip Code 27612-7133

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-420000

Amount of Each Disbursement this Period

4	.	0	6
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address DEPT HQJ-CM

City HOUSTON State TX Zip Code 77002-7363

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-430000

Amount of Each Disbursement this Period

2	5	.	0	0
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SQUARE

Mailing Address ST 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-440000

Amount of Each Disbursement this Period

4	.	6	3
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[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. BISTRO ATELIER

Mailing Address DULLES INTL A

City State Zip Code
STERLING VA 20166

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245358-450000

Amount of Each Disbursement this Period

9	.	5	8
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SQUARE

Mailing Address ST 600

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245358-460000

Amount of Each Disbursement this Period

5	.	4	0
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 8462

Mailing Address CAPITAL BLVD.

City State Zip Code
RALEIGH NC 27604

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Transaction ID : SB21B-245358-470000

Amount of Each Disbursement this Period

8	.	7	3
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[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
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0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SHABA SHABU

Mailing Address 3080 WAKE FOR

City RALEIGH State NC Zip Code 27609-7844

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-480000

Amount of Each Disbursement this Period

13.74

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS ARC SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-490000

Amount of Each Disbursement this Period

427.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BP FDMS INSIDE

Mailing Address 28100 TORCH P

City WARRENVILLE State IL Zip Code 60555-3938

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-500000

Amount of Each Disbursement this Period

9.14

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 10158

Mailing Address EVANS ROAD

City CARY State NC Zip Code 27513

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245358-510000

Amount of Each Disbursement this Period

6.13

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245358-520000

Amount of Each Disbursement this Period

9.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WHOLE FOODS MARKETRAL

Mailing Address 3540 WADE AVE

City RALEIGH State NC Zip Code 27607-4048

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245358-530000

Amount of Each Disbursement this Period

4.62

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WHOLE FOODS MARKETRAL

Mailing Address 3540 WADE AVE

City RALEIGH State NC Zip Code 27607-4048

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-540000

Amount of Each Disbursement this Period

17.40

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. JIMMY JOHN'S 1026 MOTO

Mailing Address 2904 WAKE FOR

City RALEIGH State NC Zip Code 27609

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-550000

Amount of Each Disbursement this Period

14.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 8696

Mailing Address SHOPS ON BATT

City GREENSBORO State NC Zip Code 27408

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-560000

Amount of Each Disbursement this Period

3.79

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CHICK-FIL-A 00699

Mailing Address 1803 N HARRIS

City CARY State NC Zip Code 27513-2408

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-570000

Amount of Each Disbursement this Period

7.36									
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-580000

Amount of Each Disbursement this Period

172.60									
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SHABA SHABU

Mailing Address 3080 WAKE FOR

City RALEIGH State NC Zip Code 27609-7844

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-590000

Amount of Each Disbursement this Period

16.36									
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[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00									
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TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ST LOUIS BREAD 601644

Mailing Address 4421 SIX FORK

City RALEIGH State NC Zip Code 27615

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-630000

Amount of Each Disbursement this Period

11.49

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BARNES & NOBLE 2285

Mailing Address 3125 WALTHAM

City BURLINGTON State NC Zip Code 27215-8235

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-640000

Amount of Each Disbursement this Period

19.64

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SQUARE

Mailing Address ST 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-650000

Amount of Each Disbursement this Period

6.71

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CAFE CAROLINA AND BAKERY

Mailing Address 401 DANIELS S

City RALEIGH State NC Zip Code 27605-1314

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-660000

Amount of Each Disbursement this Period

4.84

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MCDONALD'S F14590

Mailing Address 416 OBERLIN R

City RALEIGH State NC Zip Code 27605-1329

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-670000

Amount of Each Disbursement this Period

1.39

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ENTERPRISE R A C 163A

Mailing Address 2601 CALVERT

City WASHINGTON State DC Zip Code 20008-4106

Purpose of Disbursement
Travel/Accommodation /Meals

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
11			25			2014			

Transaction ID : SB21B-245358-680000

Amount of Each Disbursement this Period

4.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2014			

Transaction ID : SB21B-245359

Amount of Each Disbursement this Period

27.46

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. HUDSON NEWS

Mailing Address 2401 SMITH BL

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2014			

Transaction ID : SB21B-245359-10000

Amount of Each Disbursement this Period

6.38

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. THE GROVE - DC

Mailing Address WASHINGTON RE

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2014			

Transaction ID : SB21B-245359-20000

Amount of Each Disbursement this Period

2.52

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

27.46

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. PIZZA QUEEN

Mailing Address 215 WEYBOSSET

City Providence State RI Zip Code 02903-3833

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		20		2014

Transaction ID : SB21B-245359-30000

Amount of Each Disbursement this Period

18.56

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245360

Amount of Each Disbursement this Period

15.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO BOX 36611

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		20		2014

Transaction ID : SB21B-245360-10000

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

15.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2014			

Transaction ID : SB21B-245361

Amount of Each Disbursement this Period

652.49

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. VOICE RESTAURANT AUTO COL

Mailing Address 220 MAIN ST

City HOUSTON State TX Zip Code 77002-1706

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2014			

Transaction ID : SB21B-245361-10000

Amount of Each Disbursement this Period

57.72

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RISTORANTE I RICCHI

Mailing Address 1220 19TH ST

City WASHINGTON State DC Zip Code 20036-2438

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2014			

Transaction ID : SB21B-245361-20000

Amount of Each Disbursement this Period

69.78

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

652.49

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WAHSINGTON2 ELEPHANT&CAST

Mailing Address 900 19TH ST-

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245361-30000

Amount of Each Disbursement this Period

156.01

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 2121 K ST # 60348

Mailing Address 2121 K ST NW

City WASHINGTON State DC Zip Code 20037-1801

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245361-40000

Amount of Each Disbursement this Period

12.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CREATIVE MOBILE TECHN CMT

Mailing Address 1151 47TH AVE

City LONG ISLAND C State NY Zip Code 11101-5418

Purpose of Disbursement
Travel/Accommodation /Meals

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
11 / 25 / 2014

Transaction ID : SB21B-245361-50000

Amount of Each Disbursement this Period

9.70

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245361-60000

Amount of Each Disbursement this Period

31.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245361-70000

Amount of Each Disbursement this Period

19.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. VTS DISTRICT CAB

Mailing Address VTS DISTRICT

City WASHINGTON State DC Zip Code 20019

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245361-80000

Amount of Each Disbursement this Period

8.70

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. YELLOW CAB 328

Mailing Address 1636 BLADENSB

City WASHINGTON State DC Zip Code 20002-1889

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245361-90000

Amount of Each Disbursement this Period

19.03

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TAYLOR GOURMET

Mailing Address 1200 19TH ST

City WASHINGTON State DC Zip Code 20036-2412

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245361-10000

Amount of Each Disbursement this Period

223.96

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. YELLOW CAB 328

Mailing Address 1636 BLADENSB

City WASHINGTON State DC Zip Code 20002-1889

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B-245361-110000

Amount of Each Disbursement this Period

8.39

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TAXI CHARGE -DC

Mailing Address 465 UTICA AVE

City BROOKLYN State NY Zip Code 11203

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245361-120000

Amount of Each Disbursement this Period

9.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245361-130000

Amount of Each Disbursement this Period

28.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Discovery Benefits, Inc.

Mailing Address 3216 13th Avenue South

City Fargo State ND Zip Code 58103

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2014

Transaction ID : SB21B-245369

Amount of Each Disbursement this Period

57.75

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

57.75

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Ellen R Malcolm

Mailing Address 5060 Linnean Avenue, NW

City Washington, State DC Zip Code 20008

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : SB21B-245366

Amount of Each Disbursement this Period

555.90

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : SB21B-245364

Amount of Each Disbursement this Period

3.38

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address P.O. BOX 842854

City Boston State MA Zip Code 02284

Purpose of Disbursement
Payroll Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : SB21B-245456

Amount of Each Disbursement this Period

404.18

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

963.46

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Blackbaud Merchant Services

Mailing Address 2000 Daniel Island Drive

City Charleston State SC Zip Code 29492

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2014

Transaction ID : SB21B-245362

Amount of Each Disbursement this Period

130.60

Full Name (Last, First, Middle Initial)

B. Jeanne Duncan

Mailing Address 1633 NE Going Street

City Portland State OR Zip Code 97211

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2014

Transaction ID : SB21B-245365

Amount of Each Disbursement this Period

7000.00

Full Name (Last, First, Middle Initial)

C. Jennifer Treat Fundraising Ink

Mailing Address 3250 Tennyson St NW

City Washington State DC Zip Code 20015

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2014

Transaction ID : SB21B-245367

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10130.60

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2014

Transaction ID : SB21B-245363

Amount of Each Disbursement this Period

66.02

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address P.O. BOX 842854

City Boston State MA Zip Code 02284

Purpose of Disbursement
Taxes - Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245455

Amount of Each Disbursement this Period

138457.31

Full Name (Last, First, Middle Initial)

C. Jane Beard

Mailing Address 614 Kenyon Street NW

City Washington State DC Zip Code 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245384

Amount of Each Disbursement this Period

1629.24

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

140152.57

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Liana Eisman

Mailing Address 2801 Connecticut Ave NW
Apt 13

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245385

Amount of Each Disbursement this Period

1321.55

Category/
Type

Full Name (Last, First, Middle Initial)

B. Ellen R Malcolm

Mailing Address 5060 Linnean Avenue, NW

City Washington, State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245386

Amount of Each Disbursement this Period

992.14

Category/
Type

Full Name (Last, First, Middle Initial)

C. Jessica O'Connell

Mailing Address 1524 D Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245387

Amount of Each Disbursement this Period

5465.35

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7779.04

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Stephanie Schriock

Mailing Address 3225 Valley Drive

City Alexandria State VA Zip Code 22302

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	30	/	2014

Transaction ID : SB21B-245388

Amount of Each Disbursement this Period

7687.59

Full Name (Last, First, Middle Initial)

B. Erica Best

Mailing Address 221 Seaton Place, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	30	/	2014

Transaction ID : SB21B-245389

Amount of Each Disbursement this Period

1340.53

Full Name (Last, First, Middle Initial)

C. Arnetia Fogg

Mailing Address 1000 Mandarin Drive

City Upper Marlboro State MD Zip Code 20774

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	30	/	2014

Transaction ID : SB21B-245390

Amount of Each Disbursement this Period

1001.90

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10030.02

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Eun Young Park		Date of Disbursement MM / DD / YYYY 11 / 30 / 2014
Mailing Address 1600 S. Eads Street Apt 1205N		Transaction ID : SB21B-245391
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 1019.69
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Camille Sanders		Date of Disbursement MM / DD / YYYY 11 / 30 / 2014
Mailing Address 1103 Glen Willow Drive #13		Transaction ID : SB21B-245392
City Capitol Heights	State MD	
Zip Code 20743	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 1725.16
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Melanie Smith		Date of Disbursement MM / DD / YYYY 11 / 30 / 2014
Mailing Address 2100 Connecticut Ave, NW Apartment 609		Transaction ID : SB21B-245393
City Washington	State DC	
Zip Code 20008	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 1471.95
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4216.80
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Lauren Williams

Mailing Address 3261 Pony Ridge Way

City State Zip Code
Oakton VA 22124

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2014

Transaction ID : SB21B-245394

Amount of Each Disbursement this Period

765.42

Full Name (Last, First, Middle Initial)

B. Alyssa Barnum

Mailing Address 3500 13th Street NW
#208

City State Zip Code
Washington DC 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2014

Transaction ID : SB21B-245395

Amount of Each Disbursement this Period

2647.11

Full Name (Last, First, Middle Initial)

C. Emily Beardsley

Mailing Address 1451 Park Road NW
#313

City State Zip Code
Washington DC 20036

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2014

Transaction ID : SB21B-245396

Amount of Each Disbursement this Period

1514.30

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4926.83

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Lizzie Cooper

Mailing Address 945 Route 35

City Cross River State NY Zip Code 10518

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2014

Transaction ID : SB21B-245397

Amount of Each Disbursement this Period

2938.93

Full Name (Last, First, Middle Initial)

B. Louisa Whitney

Mailing Address 1701 16th Street NW
Apartment 721

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2014

Transaction ID : SB21B-245398

Amount of Each Disbursement this Period

3640.85

Full Name (Last, First, Middle Initial)

C. Allison Frederick

Mailing Address 3915 Cameron St
Apt 107

City Dumfries State VA Zip Code 22026

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2014

Transaction ID : SB21B-245399

Amount of Each Disbursement this Period

1157.31

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7737.09

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Anna Lidman		Date of Disbursement MM / DD / YYYY 11 / 30 / 2014
Mailing Address 37 Brookview Terrace		Transaction ID : SB21B-245400
City Portland	State ME	
Zip Code 04102	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 3446.16
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Michelle Ortiz		Date of Disbursement MM / DD / YYYY 11 / 30 / 2014
Mailing Address 2801 Turk Blvd #306		Transaction ID : SB21B-245401
City San Francisco	State CA	
Zip Code 94118	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 2782.11
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Andrea Pagano Reyes		Date of Disbursement MM / DD / YYYY 11 / 30 / 2014
Mailing Address 4501 Connecticut Ave, NW #723		Transaction ID : SB21B-245402
City Washington	State DC	
Zip Code 20008	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 2583.97
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶	8812.24
TOTAL This Period (last page this line number only)..... ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Pat Reyes

Mailing Address 2601 Glenview Rd

City State Zip Code
Glenview IL 60025

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245403

Amount of Each Disbursement this Period

3016.36

Full Name (Last, First, Middle Initial)

B. Laura Rose Wilson

Mailing Address 8100 N. Madrone Trail

City State Zip Code
Austin TX 78737

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245404

Amount of Each Disbursement this Period

2316.01

Full Name (Last, First, Middle Initial)

C. Marissa Strickfaden

Mailing Address 1100 First Street, SE
Apt 511

City State Zip Code
Washington DC 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245405

Amount of Each Disbursement this Period

1628.35

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6960.72

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Hannah Truslow

Mailing Address 809 6th Street NW
Apt. 52

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245406

Amount of Each Disbursement this Period

1280.31

Full Name (Last, First, Middle Initial)

B. Kristin White

Mailing Address 9020 Mountain Valley Road

City Fairfax State VA Zip Code 22039

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245407

Amount of Each Disbursement this Period

998.03

Full Name (Last, First, Middle Initial)

C. Kelsey Colon

Mailing Address 450 Taylor Street NE
Apt F11

City Washington State DC Zip Code 20017

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245408

Amount of Each Disbursement this Period

1331.52

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3609.86

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Robert Courtney

Mailing Address 1619 Swan Street NW

City Washington State DC Zip Code 20009

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245409

Amount of Each Disbursement this Period

1772.50

Full Name (Last, First, Middle Initial)

B. Alyssa Franke

Mailing Address 4012 47th Street NW Apt 4

City Washington State DC Zip Code 20016

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245410

Amount of Each Disbursement this Period

1055.98

Full Name (Last, First, Middle Initial)

C. Malinda Frevert

Mailing Address 769 Mohawk St.

City Columbus State OH Zip Code 43206

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245411

Amount of Each Disbursement this Period

1973.11

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4801.59

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jane Hughes

Mailing Address 1028 31st Street NW

City Washington State DC Zip Code 20007

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245412

Amount of Each Disbursement this Period

1725.44

Full Name (Last, First, Middle Initial)

B. Jenna Lowenstein

Mailing Address 389 Rhode Island Ave NW
Apt 6

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245413

Amount of Each Disbursement this Period

3219.50

Full Name (Last, First, Middle Initial)

C. Priyanka Mantha

Mailing Address 3314 Mt. Pleasant St NW
Apt 37

City Washington State DC Zip Code 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245414

Amount of Each Disbursement this Period

1271.39

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6216.33

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jessica McIntosh

Mailing Address 1700 Kalorama Road
#404

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245415

Amount of Each Disbursement this Period

2635.85

Full Name (Last, First, Middle Initial)

B. Alison McQuade

Mailing Address 320 23rd Street South
#1526

City Arlington State VA Zip Code 22202

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245416

Amount of Each Disbursement this Period

1862.62

Full Name (Last, First, Middle Initial)

C. Jennifer Medeiros

Mailing Address 2929 Connecticut Ave. NW
Apt 508

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245417

Amount of Each Disbursement this Period

1065.73

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5564.20

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Sarah Pierz

Mailing Address 925 25th St NW
Apt 316

City Washington State DC Zip Code 20037

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245418

Amount of Each Disbursement this Period

1340.43

Full Name (Last, First, Middle Initial)

B. Marciann Stech

Mailing Address 2026 16th Street, NW
Apt 3

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245419

Amount of Each Disbursement this Period

1982.80

Full Name (Last, First, Middle Initial)

C. Jessica Byrd

Mailing Address 626 S Street NW
Apt 303

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245420

Amount of Each Disbursement this Period

1802.84

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5126.07

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Sreyashe Dhar

Mailing Address 14 16th Street SW

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245421

Amount of Each Disbursement this Period

1101.15

Full Name (Last, First, Middle Initial)

B. Xakota Espinoza

Mailing Address 1119 Euclid Street NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245422

Amount of Each Disbursement this Period

1041.04

Full Name (Last, First, Middle Initial)

C. Denise Feriozzi

Mailing Address 1363 E Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245423

Amount of Each Disbursement this Period

4201.94

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6344.13

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Lucinda Guinn

Mailing Address 1425 11th Street NW
#104

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245424

Amount of Each Disbursement this Period

2600.68

Full Name (Last, First, Middle Initial)

B. Heather Kashner

Mailing Address 13 Salmon Run

City Camden State ME Zip Code 04843

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245425

Amount of Each Disbursement this Period

3171.50

Full Name (Last, First, Middle Initial)

C. Ashely Lough

Mailing Address 326 F Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245426

Amount of Each Disbursement this Period

1373.54

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7145.72

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Michele McGrorty

Mailing Address 4704 Gordon Avenue

City Monona State WI Zip Code 53716

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2014

Transaction ID : SB21B-245427

Amount of Each Disbursement this Period

1250.52

Full Name (Last, First, Middle Initial)

B. Heather Owens

Mailing Address 114 Colonial Avenue

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2014

Transaction ID : SB21B-245428

Amount of Each Disbursement this Period

1706.50

Full Name (Last, First, Middle Initial)

C. Tori Taylor

Mailing Address 470 Taylor Street, NE
Apt H-22

City Washington State DC Zip Code 20017

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2014

Transaction ID : SB21B-245429

Amount of Each Disbursement this Period

1217.62

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4174.64

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Daniella Urbina

Mailing Address 103 G Street, SW
Apt. 219B

City Washington State DC Zip Code 20024

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245430

Amount of Each Disbursement this Period

1194.42

Full Name (Last, First, Middle Initial)

B. Muthoni Wambu

Mailing Address 1215 Dexter Ave N
Apt 636

City Seattle State WA Zip Code 98109

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245431

Amount of Each Disbursement this Period

3084.16

Full Name (Last, First, Middle Initial)

C. Catherine Loeffelman

Mailing Address 1811 Wyoming Ave. NW.
Apt 1

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245432

Amount of Each Disbursement this Period

2581.08

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6859.66

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. William Rusche

Mailing Address 300 Mass Ave NW Apt 34

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245433

Amount of Each Disbursement this Period

974.39

Full Name (Last, First, Middle Initial)

B. Eric Smith

Mailing Address 130 M Street NE Apt 413

City Washington State DC Zip Code 20002

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245434

Amount of Each Disbursement this Period

1232.35

Full Name (Last, First, Middle Initial)

C. Emily Campbell

Mailing Address 554 Halloran Springs Road

City Las Vegas State NV Zip Code 89148

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245435

Amount of Each Disbursement this Period

2928.03

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5134.77

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Natalie Cone

Mailing Address 6515 Belcrest Road
Apartment 1608B

City Hyattsville State MD Zip Code 20782

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245436

Amount of Each Disbursement this Period

1021.71

Full Name (Last, First, Middle Initial)

B. Garrick Delzell

Mailing Address 415 Oak Grove St, #521

City Minneapolis State MN Zip Code 55403

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245437

Amount of Each Disbursement this Period

2671.58

Full Name (Last, First, Middle Initial)

C. Peggy Egan

Mailing Address 20518 East Shore, Hwy 35

City Bigfork State MT Zip Code 59911

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245438

Amount of Each Disbursement this Period

2618.69

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6311.98

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Alex Glass

Mailing Address 1412 15th Street NW
#5

City Washington State DC Zip Code 20005

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245439

Amount of Each Disbursement this Period

2440.20

Full Name (Last, First, Middle Initial)

B. Hillary Nachem

Mailing Address 1216 D Street SE #2

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245440

Amount of Each Disbursement this Period

2146.97

Full Name (Last, First, Middle Initial)

C. Samuel Nitz

Mailing Address 1200 N Street, NW
#608

City Washington State DC Zip Code 20005

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245441

Amount of Each Disbursement this Period

2067.35

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6654.52

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jonathan Parker

Mailing Address 1611 Hobart Street NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2014			

Transaction ID : SB21B-245442

Amount of Each Disbursement this Period

4612.86

Full Name (Last, First, Middle Initial)

B. Jessica Post

Mailing Address 355 I Street, SW
#S620

City Washington State DC Zip Code 20024

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2014			

Transaction ID : SB21B-245443

Amount of Each Disbursement this Period

2649.83

Full Name (Last, First, Middle Initial)

C. Devin Rankin

Mailing Address 2112 O Street, NW
#3

City Washington State DC Zip Code 20037

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2014			

Transaction ID : SB21B-245444

Amount of Each Disbursement this Period

2338.30

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9600.99

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Mary Jane Volk

Mailing Address 541 E. Nelson Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245445

Amount of Each Disbursement this Period

3062.41

Full Name (Last, First, Middle Initial)

B. SaBrina Brown

Mailing Address 3730 5th St.

City North Beach State MD Zip Code 20714

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245446

Amount of Each Disbursement this Period

3695.75

Full Name (Last, First, Middle Initial)

C. Lesbia Cajchun

Mailing Address 2902 Kings Chapel Rd, #7

City Falls Church State VA Zip Code 22042

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245447

Amount of Each Disbursement this Period

2124.25

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8882.41

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Caroline Fines

Mailing Address 10621 Regent Park Court

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245448

Amount of Each Disbursement this Period

2523.77

Full Name (Last, First, Middle Initial)

B. Sarah Hasenfuss

Mailing Address 1 Scott Circle NW
Apt 414

City Washington State DC Zip Code 20036

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245449

Amount of Each Disbursement this Period

1031.05

Full Name (Last, First, Middle Initial)

C. Ray Keating

Mailing Address 816 Lucky Rd

City Severn State MD Zip Code 21144

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245450

Amount of Each Disbursement this Period

2393.88

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5948.70

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Victoria Kempter

Mailing Address 4306 Alton PI NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245451

Amount of Each Disbursement this Period

1216.02

Full Name (Last, First, Middle Initial)

B. Sanskruti Majmudar

Mailing Address 3754 McKinley Street NW

City Washington State DC Zip Code 20015

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245452

Amount of Each Disbursement this Period

1090.98

Full Name (Last, First, Middle Initial)

C. Leigh Warren

Mailing Address 3023 S Columbus St

City Arlington State VA Zip Code 22206

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2014

Transaction ID : SB21B-245453

Amount of Each Disbursement this Period

3021.85

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5328.85

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Kate Watts

Mailing Address 1425 4th Street, SW
Apt. A217

City Washington State DC Zip Code 20024

Purpose of Disbursement
Salaries

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
1	1		3	0		2	0	1	4

Transaction ID : SB21B-245454

Amount of Each Disbursement this Period

1	1	8	1	.	1	8
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. John Hancock c/o City Bank Delaware

Mailing Address 1615 Brett Road Lock Box 7122

City New Castle State DE Zip Code 19720

Purpose of Disbursement
Employment Pension/ 401(k)

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
1	2		0	1		2	0	1	4

Transaction ID : SB21B-245855

Amount of Each Disbursement this Period

1	3	9	0	.	1	8
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Andrea Pagano Reyes

Mailing Address 4501 Connecticut Ave, NW #723

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

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
1	2		0	1		2	0	1	4

Transaction ID : SB21B-245370

Amount of Each Disbursement this Period

3	2	7	2	.	4	3
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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1	8	3	5	.	7	9
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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Emily Beardsley

Mailing Address 1451 Park Road NW
#313

City Washington State DC Zip Code 20036

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2014

Transaction ID : SB21B-245371

Amount of Each Disbursement this Period

1140.30

Full Name (Last, First, Middle Initial)

B. Lizzie Cooper

Mailing Address 945 Route 35

City Cross River State NY Zip Code 10518

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2014

Transaction ID : SB21B-245373

Amount of Each Disbursement this Period

3503.12

Full Name (Last, First, Middle Initial)

C. Anna Lidman

Mailing Address 37 Brookview Terrace

City Portland State ME Zip Code 04102

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2014

Transaction ID : SB21B-245374

Amount of Each Disbursement this Period

3214.54

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7857.96

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Michelle Ortiz

Mailing Address 2801 Turk Blvd #306

City San Francisco State CA Zip Code 94118

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014

Transaction ID : SB21B-245375

Amount of Each Disbursement this Period

3213.72

Full Name (Last, First, Middle Initial)

B. Pat Reyes

Mailing Address 2601 Glenview Rd

City Glenview State IL Zip Code 60025

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014

Transaction ID : SB21B-245376

Amount of Each Disbursement this Period

3641.64

Full Name (Last, First, Middle Initial)

C. Laura Rose

Mailing Address 8100 N Madrone Trl

City Austin State TX Zip Code 78737

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014

Transaction ID : SB21B-245377

Amount of Each Disbursement this Period

3527.81

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10383.17

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Marissa Strickfaden

Mailing Address 1100 First Street, SE
Apt 511

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014

Transaction ID : SB21B-245379

Amount of Each Disbursement this Period

1140.29

Full Name (Last, First, Middle Initial)

B. Hannah Truslow

Mailing Address 809 6th Street NW
Apt. 52

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014

Transaction ID : SB21B-245380

Amount of Each Disbursement this Period

420.03

Full Name (Last, First, Middle Initial)

C. Louisa Whitney

Mailing Address 1701 16th Street NW
Apartment 721

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014

Transaction ID : SB21B-245381

Amount of Each Disbursement this Period

6464.26

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8024.58

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Kristin White

Mailing Address 9020 Mountain Valley Road

City State Zip Code
Fairfax VA 22039

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014

Transaction ID : SB21B-245382

Amount of Each Disbursement this Period

420.07

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address 808 East Utah Valley Drive

City State Zip Code
American Fork UT 84003

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2014

Transaction ID : SB21B-245969

Amount of Each Disbursement this Period

31.85

Full Name (Last, First, Middle Initial)

C. Discovery Benefits, Inc.

Mailing Address 3216 13th Avenue South

City State Zip Code
 Fargo ND 58103

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2014

Transaction ID : SB21B-245833

Amount of Each Disbursement this Period

705.37

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1157.29

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elavon

Mailing Address One Concourse Parkway
Ste 300

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2014

Transaction ID : SB21B-245830

Amount of Each Disbursement this Period

531.85

Full Name (Last, First, Middle Initial)

B. MAC Solutions

Mailing Address 5612 Lafayette Place

City Hyattsville State MD Zip Code 20781

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2014

Transaction ID : SB21B-245457

Amount of Each Disbursement this Period

5389.38

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2014

Transaction ID : SB21B-245831

Amount of Each Disbursement this Period

1026.65

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6947.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. First Data Merchant Services

Mailing Address PO Box 6010

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2014

Transaction ID : **SB21B-245970**

Amount of Each Disbursement this Period

1002.50

Full Name (Last, First, Middle Initial)

B. First Data Merchant Services

Mailing Address PO Box 6010

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2014

Transaction ID : **SB21B-245832**

Amount of Each Disbursement this Period

30282.47

Full Name (Last, First, Middle Initial)

C. Avalanche Services

Mailing Address 113 McGarry Blvd

City Kearneysville State WV Zip Code 25430

Purpose of Disbursement
Void Check

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : **SB21B-245493**

Amount of Each Disbursement this Period

-2789.78

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

28495.19

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Avalanche Services

Mailing Address 113 McGarry Blvd

City State Zip Code
Kearneysville WV 25430

Purpose of Disbursement
Void Check

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SB21B-245494

Amount of Each Disbursement this Period

-2699.96

Full Name (Last, First, Middle Initial)

B. Avalanche Services

Mailing Address 113 McGarry Blvd

City State Zip Code
Kearneysville WV 25430

Purpose of Disbursement
Void Check

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SB21B-245495

Amount of Each Disbursement this Period

-3321.32

Full Name (Last, First, Middle Initial)

C. Avalanche Services

Mailing Address 113 McGarry Blvd

City State Zip Code
Kearneysville WV 25430

Purpose of Disbursement
Void Check

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SB21B-245496

Amount of Each Disbursement this Period

-2627.87

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

-8649.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Avalanche Services

Mailing Address 113 McGarry Blvd

City State Zip Code
Kearneysville WV 25430

Purpose of Disbursement
Void Check

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SB21B-245497

Amount of Each Disbursement this Period

-986.91

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address P.O. BOX 842854

City State Zip Code
Boston MA 02284

Purpose of Disbursement
Payroll Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SB21B-245458

Amount of Each Disbursement this Period

131.98

Full Name (Last, First, Middle Initial)

C. Belardi/Ostroy

Mailing Address PO Box 416022

City State Zip Code
Boston MA 02241

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SB21B-245459

Amount of Each Disbursement this Period

107.72

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

-747.21

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Belardi/Ostroy

Mailing Address PO Box 416022

City Boston State MA Zip Code 02241

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : SB21B-245460

Amount of Each Disbursement this Period

105.25

Full Name (Last, First, Middle Initial)

B. Belardi/Ostroy

Mailing Address PO Box 416022

City Boston State MA Zip Code 02241

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : SB21B-245461

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

C. Belardi/Ostroy

Mailing Address PO Box 416022

City Boston State MA Zip Code 02241

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : SB21B-245462

Amount of Each Disbursement this Period

220.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

395.25

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Belardi/Ostroy		Date of Disbursement MM / DD / YYYY 12 / 04 / 2014
Mailing Address PO Box 416022		Transaction ID : SB21B-245463
City Boston	State MA	
Zip Code 02241	Purpose of Disbursement List Rental	Amount of Each Disbursement this Period 620.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Blue State Digital		Date of Disbursement MM / DD / YYYY 12 / 04 / 2014
Mailing Address 62187 Collections Center Drive		Transaction ID : SB21B-245464
City Chicago	State IL	
Zip Code 60693-0621	Purpose of Disbursement Website Development & Design	Amount of Each Disbursement this Period 5250.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Bulletproof		Date of Disbursement MM / DD / YYYY 12 / 04 / 2014
Mailing Address 1840 41st Ave, #102-333		Transaction ID : SB21B-245465
City Capitola	State CA	
Zip Code 95010	Purpose of Disbursement Direct Mail Production	Amount of Each Disbursement this Period 281.25
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	6151.25
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Bulletproof

Mailing Address 1840 41st Ave, #102-333

City State Zip Code
Capitola CA 95010

Purpose of Disbursement
Direct Mail Production

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
12 / 04 / 2014

Transaction ID : SB21B-245466

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. Creative Print Group Inc

Mailing Address 1560 Caton Center Drive

City State Zip Code
Baltimore MD 21227

Purpose of Disbursement
Printing

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
12 / 04 / 2014

Transaction ID : SB21B-245467

Amount of Each Disbursement this Period

1461.60

Full Name (Last, First, Middle Initial)

C. Creative Print Group Inc

Mailing Address 1560 Caton Center Drive

City State Zip Code
Baltimore MD 21227

Purpose of Disbursement
Printing

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
12 / 04 / 2014

Transaction ID : SB21B-245468

Amount of Each Disbursement this Period

3167.81

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4779.41

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Donor Services Group LLC

Mailing Address 6715 Sunset Blvd

City Los Angeles State CA Zip Code 90028

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SB21B-245469

Amount of Each Disbursement this Period

136.85

Full Name (Last, First, Middle Initial)

B. Donor Services Group LLC

Mailing Address 6715 Sunset Blvd

City Los Angeles State CA Zip Code 90028

Purpose of Disbursement
Phone Banks

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SB21B-245470

Amount of Each Disbursement this Period

2434.35

Full Name (Last, First, Middle Initial)

C. Donor Services Group LLC

Mailing Address 6715 Sunset Blvd

City Los Angeles State CA Zip Code 90028

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SB21B-245471

Amount of Each Disbursement this Period

170.09

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2741.29

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Donor Services Group LLC

Mailing Address 6715 Sunset Blvd

City Los Angeles State CA Zip Code 90028

Purpose of Disbursement Deliveries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 04 / 2014

Transaction ID : **SB21B-245472**

Amount of Each Disbursement this Period: 0.35

Category/Type

Full Name (Last, First, Middle Initial)
B. Donor Services Group LLC

Mailing Address 6715 Sunset Blvd

City Los Angeles State CA Zip Code 90028

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 04 / 2014

Transaction ID : **SB21B-245473**

Amount of Each Disbursement this Period: 0.44

Category/Type

Full Name (Last, First, Middle Initial)
C. Donor Services Group LLC

Mailing Address 6715 Sunset Blvd

City Los Angeles State CA Zip Code 90028

Purpose of Disbursement Data Management

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 04 / 2014

Transaction ID : **SB21B-245474**

Amount of Each Disbursement this Period: 15865.20

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15865.99

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Donor Services Group LLC

Mailing Address 6715 Sunset Blvd

City Los Angeles State CA Zip Code 90028

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : SB21B-245475

Amount of Each Disbursement this Period

179.66

Full Name (Last, First, Middle Initial)

B. Donor Services Group LLC

Mailing Address 6715 Sunset Blvd

City Los Angeles State CA Zip Code 90028

Purpose of Disbursement
Direct Mail Production

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : SB21B-245476

Amount of Each Disbursement this Period

144.55

Full Name (Last, First, Middle Initial)

C. Geiger

Mailing Address PO Box 712144

City Cincinnati State OH Zip Code 45271

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : SB21B-245478

Amount of Each Disbursement this Period

1114.15

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1438.36

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Gilbert & Wolfand

Mailing Address Suite 320
2201 Wisconsin Ave., NW

City Washington, State DC Zip Code 20007

Purpose of Disbursement
Accounting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2014

Transaction ID : SB21B-245479

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

B. Anne Hughes

Mailing Address 3291 Sutton Place NW
#3291 D

City Washington, State DC Zip Code 20016

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2014

Transaction ID : SB21B-245480

Amount of Each Disbursement this Period

460.00

Full Name (Last, First, Middle Initial)

C. Annie Hughes, Type A Strategies, LLC

Mailing Address 3291 Sutton Place NW
#3291 D

City Washington, State DC Zip Code 20016

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2014

Transaction ID : SB21B-245481

Amount of Each Disbursement this Period

11000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

23960.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Kastle Key Systems

Mailing Address PO Box 75151

City Baltimore State MD Zip Code 21275-5151

Purpose of Disbursement
Building Utilities & Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : SB21B-245482

Amount of Each Disbursement this Period

297.00

Full Name (Last, First, Middle Initial)

B. MetLife Small Business Center

Mailing Address PO Box 804466

City Kansas City State MO Zip Code 64180

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : SB21B-245483

Amount of Each Disbursement this Period

3179.46

Full Name (Last, First, Middle Initial)

C. Pacific East

Mailing Address 4900 SW Griffith Drive
Suite 251

City Beaverton State OR Zip Code 97005

Purpose of Disbursement
Data Management

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : SB21B-245484

Amount of Each Disbursement this Period

63.30

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3539.76

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Pacific East

Mailing Address 4900 SW Griffith Drive
Suite 251

City Beaverton State OR Zip Code 97005

Purpose of Disbursement
Data Management

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2014

Transaction ID : SB21B-245485

Amount of Each Disbursement this Period

1206.09

Full Name (Last, First, Middle Initial)

B. Prisa Acquisition LLC c/o Cassidy Turley

Mailing Address PO Box 905146

City Charlotte State NC Zip Code 28290

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2014

Transaction ID : SB21B-245486

Amount of Each Disbursement this Period

157806.99

Full Name (Last, First, Middle Initial)

C. Purchase Power

Mailing Address PO Box 371874

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2014

Transaction ID : SB21B-245487

Amount of Each Disbursement this Period

800.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

159813.08

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Eric Smith

Mailing Address 130 M Street NE Apt 413

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	04	/	2014

Transaction ID : SB21B-245489

Amount of Each Disbursement this Period

18.36

Full Name (Last, First, Middle Initial)

B. Telefund, Inc. Attn:Nicole Lane

Mailing Address P.O. Box 2366

City Denver State CO Zip Code 80201-2366

Purpose of Disbursement
Phone Banks

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	04	/	2014

Transaction ID : SB21B-245490

Amount of Each Disbursement this Period

1934.70

Full Name (Last, First, Middle Initial)

C. Telefund, Inc. Attn:Nicole Lane

Mailing Address P.O. Box 2366

City Denver State CO Zip Code 80201-2366

Purpose of Disbursement
Phone Banks

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	04	/	2014

Transaction ID : SB21B-245491

Amount of Each Disbursement this Period

109.32

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2062.38

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Avalanche Services

Mailing Address 113 McGarry Blvd

City State Zip Code
Kearneysville WV 25430

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
12 / 04 / 2014

Transaction ID : SB21B-245498

Amount of Each Disbursement this Period

2789.78

Full Name (Last, First, Middle Initial)

B. Avalanche Services

Mailing Address 113 McGarry Blvd

City State Zip Code
Kearneysville WV 25430

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
12 / 04 / 2014

Transaction ID : SB21B-245499

Amount of Each Disbursement this Period

2699.96

Full Name (Last, First, Middle Initial)

C. Avalanche Services

Mailing Address 113 McGarry Blvd

City State Zip Code
Kearneysville WV 25430

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
12 / 04 / 2014

Transaction ID : SB21B-245500

Amount of Each Disbursement this Period

3321.32

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8811.06

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Avalanche Services

Mailing Address 113 McGarry Blvd

City State Zip Code
Kearneysville WV 25430

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 04 / 2014

Transaction ID : SB21B-245501

Amount of Each Disbursement this Period

2627.87

Full Name (Last, First, Middle Initial)

B. Avalanche Services

Mailing Address 113 McGarry Blvd

City State Zip Code
Kearneysville WV 25430

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 04 / 2014

Transaction ID : SB21B-245502

Amount of Each Disbursement this Period

986.91

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 14 Arrow Street

City State Zip Code
Cambridge MA 02138

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 05 / 2014

Transaction ID : SB21B-245834

Amount of Each Disbursement this Period

5.09

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3619.87

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address P.O. BOX 842854

City Boston State MA Zip Code 02284

Purpose of Disbursement
Payroll Service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2014

Transaction ID : SB21B-245836

Amount of Each Disbursement this Period

313.02

B. Blackbaud Merchant Services

Mailing Address 2000 Daniel Island Drive

City Charleston State SC Zip Code 29492

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2014

Transaction ID : SB21B-245839

Amount of Each Disbursement this Period

6.76

C. Verdolino & Lowey, P.C. Lisa Paulson

Mailing Address 124 Washington St., Suite 101

City Foxboro State MA Zip Code 02035

Purpose of Disbursement
Void Check

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2014

Transaction ID : SB21B-245968

Amount of Each Disbursement this Period

-736.42

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

-416.64

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Amelia Showalter		Date of Disbursement MM / DD / YYYY 12 / 09 / 2014
Mailing Address 2139 Newport PI NW #4		Transaction ID : SB21B-245505
City Washington	State DC	
Zip Code 20037	Purpose of Disbursement Void Check	Amount of Each Disbursement this Period -5000.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Prolist - Direct Marketing Services		Date of Disbursement MM / DD / YYYY 12 / 09 / 2014
Mailing Address 8341 Beechcraft Avenue		Transaction ID : SB21B-245506
City Gaithersburg	State MD	
Zip Code 20879	Purpose of Disbursement Void Check	Amount of Each Disbursement this Period -7457.45
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Stephanie Schriock		Date of Disbursement MM / DD / YYYY 12 / 09 / 2014
Mailing Address 3225 Valley Drive		Transaction ID : SB21B-245510
City Alexandria	State VA	
Zip Code 22302	Purpose of Disbursement Void Check	Amount of Each Disbursement this Period -250.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶	-12707.45
TOTAL This Period (last page this line number only)..... ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Encompass Elements

Mailing Address 185 Discovery Drive
Attn: Cathy Kaspar

City Colmar State PA Zip Code 18915

Purpose of Disbursement
Void Check

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			09			2014			

Transaction ID : SB21B-245507

Amount of Each Disbursement this Period

-13800.00

Full Name (Last, First, Middle Initial)

B. Purchase Power

Mailing Address PO Box 371874

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement
Void Check

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			09			2014			

Transaction ID : SB21B-245508

Amount of Each Disbursement this Period

-800.00

Full Name (Last, First, Middle Initial)

C. Stephanie Schriock

Mailing Address 3225 Valley Drive

City Alexandria State VA Zip Code 22302

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			09			2014			

Transaction ID : SB21B-245511

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

-14350.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Washington Promotions & Printing Inc

Mailing Address 3402 Connecticut Ave NW
2nd Floor

City Washington State DC Zip Code 20036

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		10		2014

Transaction ID : SB21B-245519

Amount of Each Disbursement this Period

-907.00

Full Name (Last, First, Middle Initial)

B. Mitchell Lester

Mailing Address 2633 Lincoln Blvd.
#725

City Santa Monica State CA Zip Code 90405

Purpose of Disbursement
Void Check

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		10		2014

Transaction ID : SB21B-245520

Amount of Each Disbursement this Period

-298.00

Full Name (Last, First, Middle Initial)

C. Tori Taylor

Mailing Address 470 Taylor Street, NE
Apt H-22

City Washington State DC Zip Code 20017

Purpose of Disbursement
Void Check

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		10		2014

Transaction ID : SB21B-245515

Amount of Each Disbursement this Period

-19.28

SUBTOTAL of Disbursements This Page (optional)..... ▶

-1224.28

TOTAL This Period (last page this line number only)..... ▶

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tori Taylor

Mailing Address 470 Taylor Street, NE
Apt H-22

City Washington State DC Zip Code 20017

Purpose of Disbursement
Void Check

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		10		2014

Transaction ID : SB21B-245516

Amount of Each Disbursement this Period

-100.00

Full Name (Last, First, Middle Initial)

B. Tori Taylor

Mailing Address 470 Taylor Street, NE
Apt H-22

City Washington State DC Zip Code 20017

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		10		2014

Transaction ID : SB21B-245517

Amount of Each Disbursement this Period

19.28

Full Name (Last, First, Middle Initial)

C. Tori Taylor

Mailing Address 470 Taylor Street, NE
Apt H-22

City Washington State DC Zip Code 20017

Purpose of Disbursement
Telephone

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		10		2014

Transaction ID : SB21B-245518

Amount of Each Disbursement this Period

100.00

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

19.28

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Sprint PCS

Mailing Address P.O. Box 62071

City Baltimore State MD Zip Code 21264-2071

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 10 / 2014

Transaction ID : SB21B-245518-10000

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Mitchell Lester

Mailing Address 2633 Lincoln Blvd.
#725

City Santa Monica State CA Zip Code 90405

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 10 / 2014

Transaction ID : SB21B-245521

Amount of Each Disbursement this Period

298.00

Full Name (Last, First, Middle Initial)

C. Jamal Simmons

Mailing Address 1640 Rhode Island Ave NW

City Washington State DC Zip Code 20036

Purpose of Disbursement Void Check

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245522

Amount of Each Disbursement this Period

-30.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

268.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Allied Printing Resources

Mailing Address 33 Commerce Road

City Carlstadt State NJ Zip Code 07072

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
12 / 11 / 2014

Transaction ID : SB21B-245523

Amount of Each Disbursement this Period

1389.30

Full Name (Last, First, Middle Initial)

B. The Atlas Project

Mailing Address 888 16th Street, NW
Suite 620

City Washington State DC Zip Code 20006

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245524

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. SaBrina Brown

Mailing Address 3730 5th St.

City North Beach State MD Zip Code 20714

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245526

Amount of Each Disbursement this Period

51.99

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3941.29

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Comcast

Mailing Address 40 West Leeds Ave

City Pleasantville State NJ Zip Code 08232

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB21B-245526-10000

Amount of Each Disbursement this Period

51.99

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Blue State Digital

Mailing Address 62187 Collections Center Drive

City Chicago State IL Zip Code 60693-0621

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB21B-245527

Amount of Each Disbursement this Period

9000.00

Full Name (Last, First, Middle Initial)

C. Blue State Digital

Mailing Address 62187 Collections Center Drive

City Chicago State IL Zip Code 60693-0621

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB21B-245528

Amount of Each Disbursement this Period

22500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

31500.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Blue State Digital

Mailing Address 62187 Collections Center Drive

City Chicago State IL Zip Code 60693-0621

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245529

Amount of Each Disbursement this Period

40925.25

Full Name (Last, First, Middle Initial)

B. Blue State Digital

Mailing Address 62187 Collections Center Drive

City Chicago State IL Zip Code 60693-0621

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245530

Amount of Each Disbursement this Period

39375.00

Full Name (Last, First, Middle Initial)

C. Blue State Digital

Mailing Address 62187 Collections Center Drive

City Chicago State IL Zip Code 60693-0621

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245531

Amount of Each Disbursement this Period

2855.25

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

83155.50

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Blue State Digital

Mailing Address 62187 Collections Center Drive

City Chicago State IL Zip Code 60693-0621

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB21B-245532

Amount of Each Disbursement this Period

155.25

Full Name (Last, First, Middle Initial)

B. Bulletproof

Mailing Address 1840 41st Ave, #102-333

City Capitola State CA Zip Code 95010

Purpose of Disbursement
Direct Mail Production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB21B-245533

Amount of Each Disbursement this Period

37.50

Full Name (Last, First, Middle Initial)

C. Bulletproof

Mailing Address 1840 41st Ave, #102-333

City Capitola State CA Zip Code 95010

Purpose of Disbursement
Direct Mail Production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB21B-245534

Amount of Each Disbursement this Period

168.76

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

361.51

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Broadview Networks

Mailing Address P.O. Box 9242

City Uniondale State NY Zip Code 11555

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245535

Amount of Each Disbursement this Period

2196.51

Category/Type

Full Name (Last, First, Middle Initial)

B. Chapman Cubine Adams Hussey

Mailing Address 2000 15th Street North Ste 550

City Arlington State VA Zip Code 22201

Purpose of Disbursement Copying/Faxing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245536

Amount of Each Disbursement this Period

47.25

Category/Type

Full Name (Last, First, Middle Initial)

C. Chapman Cubine Adams Hussey

Mailing Address 2000 15th Street North Ste 550

City Arlington State VA Zip Code 22201

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245537

Amount of Each Disbursement this Period

47.90

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2291.66

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Chapman Cubine Adams Hussey

Mailing Address 2000 15th Street North
Ste 550

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245542

Amount of Each Disbursement this Period

22830.00

Full Name (Last, First, Middle Initial)

B. Chapman Cubine Adams Hussey

Mailing Address 2000 15th Street North
Ste 550

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Copy Writer

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245543

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Chapman Cubine Adams Hussey

Mailing Address 2000 15th Street North
Ste 550

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Design/Graphics

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245544

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

30830.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Chapman Cubine Adams Hussey

Mailing Address 2000 15th Street North
Ste 550

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Direct Mail Production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245545

Amount of Each Disbursement this Period

322.72

Full Name (Last, First, Middle Initial)

B. Chapman Cubine Adams Hussey

Mailing Address 2000 15th Street North
Ste 550

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Direct Mail Production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245546

Amount of Each Disbursement this Period

1898.56

Full Name (Last, First, Middle Initial)

C. Cogent Communications, Inc.

Mailing Address P.O. Box 791087

City Baltimore State MD Zip Code 21279-1087

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245547

Amount of Each Disbursement this Period

2100.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4321.28

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Creative Print Group Inc

Mailing Address 1560 Caton Center Drive

City Baltimore State MD Zip Code 21227

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : **SB21B-245549**

Amount of Each Disbursement this Period

1194.10

Full Name (Last, First, Middle Initial)

B. Creative Print Group Inc

Mailing Address 1560 Caton Center Drive

City Baltimore State MD Zip Code 21227

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : **SB21B-245550**

Amount of Each Disbursement this Period

1314.10

Full Name (Last, First, Middle Initial)

C. Creative Print Group Inc

Mailing Address 1560 Caton Center Drive

City Baltimore State MD Zip Code 21227

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : **SB21B-245551**

Amount of Each Disbursement this Period

1584.40

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4092.60

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Creative Print Group Inc

Mailing Address 1560 Caton Center Drive

City Baltimore State MD Zip Code 21227

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
12 / 11 / 2014

Transaction ID : SB21B-245552

Amount of Each Disbursement this Period

1449.84

Full Name (Last, First, Middle Initial)

B. Creative Print Group Inc

Mailing Address 1560 Caton Center Drive

City Baltimore State MD Zip Code 21227

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
12 / 11 / 2014

Transaction ID : SB21B-245553

Amount of Each Disbursement this Period

1194.10

Full Name (Last, First, Middle Initial)

C. Creative Print Group Inc

Mailing Address 1560 Caton Center Drive

City Baltimore State MD Zip Code 21227

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
12 / 11 / 2014

Transaction ID : SB21B-245554

Amount of Each Disbursement this Period

988.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3631.94

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Direct Mail Solutions

Mailing Address 4500 Sarellen Road
Attn: Stephanie Hoy

City Richmond State VA Zip Code 23231

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB21B-245555

Amount of Each Disbursement this Period

47386.03

Full Name (Last, First, Middle Initial)

B. Doyle Printing and Offset Co

Mailing Address 5206 46th Ave

City Hyattsville State MD Zip Code 20781

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB21B-245556

Amount of Each Disbursement this Period

285.00

Full Name (Last, First, Middle Initial)

C. Encompass Elements

Mailing Address 185 Discovery Drive
Attn: Cathy Kaspar

City Colmar State PA Zip Code 18915

Purpose of Disbursement
Data Management

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB21B-245557

Amount of Each Disbursement this Period

600.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

48271.03

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Encompass Elements

Mailing Address 185 Discovery Drive
Attn: Cathy Kaspar

City Colmar State PA Zip Code 18915

Purpose of Disbursement
Direct Mail Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-245558

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. Encompass Elements

Mailing Address 185 Discovery Drive
Attn: Cathy Kaspar

City Colmar State PA Zip Code 18915

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-245559

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. Encompass Elements

Mailing Address 185 Discovery Drive
Attn: Cathy Kaspar

City Colmar State PA Zip Code 18915

Purpose of Disbursement
Data Management

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-245564

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Encompass Elements

Mailing Address 185 Discovery Drive
Attn: Cathy Kaspar

City Colmar State PA Zip Code 18915

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245565

Amount of Each Disbursement this Period

6199.10

Category/
Type

Full Name (Last, First, Middle Initial)

B. Encompass Elements

Mailing Address 185 Discovery Drive
Attn: Cathy Kaspar

City Colmar State PA Zip Code 18915

Purpose of Disbursement
Direct Mail Production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245566

Amount of Each Disbursement this Period

350.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. Executive Mailing Service

Mailing Address 7855 W. 111th Street
Attn: Kim Eckman

City Palos Hills State IL Zip Code 60465

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245567

Amount of Each Disbursement this Period

5825.66

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

12374.76

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Geiger

Mailing Address PO Box 712144

City Cincinnati State OH Zip Code 45271

Purpose of Disbursement
Direct Mail Production

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245568

Amount of Each Disbursement this Period

2122.22

Full Name (Last, First, Middle Initial)

B. Iron Mountain

Mailing Address P O Box 27128

City New York State NY Zip Code 10087

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245569

Amount of Each Disbursement this Period

502.41

Full Name (Last, First, Middle Initial)

C. Ray Keating

Mailing Address 816 Lucky Rd

City Severn State MD Zip Code 21144

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245570

Amount of Each Disbursement this Period

40.00

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2664.63

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 25505

City Lehigh Valley State PA Zip Code 18002-5505

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245570-10000

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
Data Management

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245571

Amount of Each Disbursement this Period

1296.89

Full Name (Last, First, Middle Initial)

C. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245572

Amount of Each Disbursement this Period

721.87

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2018.76

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245573

Amount of Each Disbursement this Period

112.50

Full Name (Last, First, Middle Initial)

B. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245574

Amount of Each Disbursement this Period

63.75

Full Name (Last, First, Middle Initial)

C. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245575

Amount of Each Disbursement this Period

148.84

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

325.09

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245576

Amount of Each Disbursement this Period

609.67

Full Name (Last, First, Middle Initial)

B. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245577

Amount of Each Disbursement this Period

155.15

Full Name (Last, First, Middle Initial)

C. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
Data Management

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245578

Amount of Each Disbursement this Period

3223.50

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3988.32

**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)
EMILY's List

A. MMI Direct

Full Name (Last, First, Middle Initial)

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement List Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 11 / 2014

Transaction ID : **SB21B-245579**

Amount of Each Disbursement this Period: 306.61

B. MMI Direct

Full Name (Last, First, Middle Initial)

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement List Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 11 / 2014

Transaction ID : **SB21B-245580**

Amount of Each Disbursement this Period: 398.98

C. MMI Direct

Full Name (Last, First, Middle Initial)

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement List Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 11 / 2014

Transaction ID : **SB21B-245581**

Amount of Each Disbursement this Period: 35.00

SUBTOTAL of Disbursements This Page (optional)..... ▶ 740.59

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245582

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245583

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

C. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245584

Amount of Each Disbursement this Period

280.86

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

335.86

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
1	2	3		4	5	6		7	8	9	0	1	2

Transaction ID : SB21B-245585

Amount of Each Disbursement this Period

7	9	6	1
---	---	---	---

Full Name (Last, First, Middle Initial)

B. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
1	2	3		4	5	6		7	8	9	0	1	2

Transaction ID : SB21B-245586

Amount of Each Disbursement this Period

9	6	2	5
---	---	---	---

Full Name (Last, First, Middle Initial)

C. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
1	2	3		4	5	6		7	8	9	0	1	2

Transaction ID : SB21B-245587

Amount of Each Disbursement this Period

9	5	8	0
---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2	7	1	6	6
---	---	---	---	---

2	7	1	6	6
---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245588

Amount of Each Disbursement this Period

47.50

Full Name (Last, First, Middle Initial)

B. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245589

Amount of Each Disbursement this Period

80.00

Full Name (Last, First, Middle Initial)

C. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245590

Amount of Each Disbursement this Period

39.38

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

166.88

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MMI Direct

Mailing Address 7160 Columbia Gateway Drive
Suite 300

City Columbia State MD Zip Code 21046

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	11	/	2014

Transaction ID : SB21B-245594

Amount of Each Disbursement this Period

177.50

Full Name (Last, First, Middle Initial)

B. New Organizing Institute Education Fund

Mailing Address 1133 19th St NW Ste 850

City Washington State DC Zip Code 20036

Purpose of Disbursement
Meeting/Conference

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	11	/	2014

Transaction ID : SB21B-245595

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Noreast Capital Corporation

Mailing Address PO Box 4128

City Annapolis State MD Zip Code 21403

Purpose of Disbursement
Equipment Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	11	/	2014

Transaction ID : SB21B-245596

Amount of Each Disbursement this Period

162.86

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5340.36

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Ola Consulting

Mailing Address 633 S Buchanan St

City State Zip Code
Arlington VA 22204

Purpose of Disbursement
Consulting Fundraising

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
12			11			2014			

Transaction ID : SB21B-245597

Amount of Each Disbursement this Period

22050.00

Full Name (Last, First, Middle Initial)

B. Prisa Acquisition LLC c/o Cassidy Turley

Mailing Address PO Box 905146

City State Zip Code
Charlotte NC 28290

Purpose of Disbursement
Building Utilities & Fees

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
12			11			2014			

Transaction ID : SB21B-245598

Amount of Each Disbursement this Period

317.25

Full Name (Last, First, Middle Initial)

C. Perkins Coie Attn: Client Accounting

Mailing Address 1201 Third Avenue, 49th Floor

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal Services

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
12			11			2014			

Transaction ID : SB21B-245599

Amount of Each Disbursement this Period

15413.66

SUBTOTAL of Disbursements This Page (optional)..... ▶

37780.91

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Perkins Coie Attn: Client Accounting

Mailing Address 1201 Third Avenue, 49th Floor

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245600

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Perkins Coie Attn: Client Accounting

Mailing Address 1201 Third Avenue, 49th Floor

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245601

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Jessica Post

Mailing Address 107 E Maple

City State Zip Code
Alexandria VA 22301

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245602

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GE Capital C/O RICOH USA PROGRAM

Mailing Address PO Box 41564

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement Equipment Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 11 / 2014

Transaction ID : **SB21B-245603**

Amount of Each Disbursement this Period: 3422.36

Category/Type

Full Name (Last, First, Middle Initial)

B. Sedgwick Claims Management

Mailing Address 36392 Treasury Center

City Chicago State IL Zip Code 60694

Purpose of Disbursement Insurance General

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 11 / 2014

Transaction ID : **SB21B-245604**

Amount of Each Disbursement this Period: 140.00

Category/Type

Full Name (Last, First, Middle Initial)

C. Amelia Showalter

Mailing Address 2139 Newport PI NW #4

City Washington State DC Zip Code 20037

Purpose of Disbursement Consulting Fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 11 / 2014

Transaction ID : **SB21B-245605**

Amount of Each Disbursement this Period: 5000.00

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8562.36

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Sunshine Sachs

Mailing Address 136 Madison Ave.
17th Floor

City New York State NY Zip Code 10016

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : **SB21B-245607**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Sunshine Sachs

Mailing Address 136 Madison Ave.
17th Floor

City New York State NY Zip Code 10016

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : **SB21B-245608**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Tri-State Envelope Corporation

Mailing Address PO Box 433

City Beltsville State MD Zip Code 20704

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : **SB21B-245609**

Amount of Each Disbursement this Period

950.18

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15950.18

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tri-State Envelope Corporation

Mailing Address PO Box 433

City State Zip Code
Beltsville MD 20704

Purpose of Disbursement
Printing

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
12 / 11 / 2014

Transaction ID : SB21B-245610

Amount of Each Disbursement this Period

985.61

Full Name (Last, First, Middle Initial)

B. United Parcel Service

Mailing Address P. O. Box 7247-0244

City State Zip Code
Philadelphia PA 19170-0001

Purpose of Disbursement
Deliveries

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
12 / 11 / 2014

Transaction ID : SB21B-245611

Amount of Each Disbursement this Period

34.32

Full Name (Last, First, Middle Initial)

C. United Parcel Service

Mailing Address P. O. Box 7247-0244

City State Zip Code
Philadelphia PA 19170-0001

Purpose of Disbursement
Deliveries

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
12 / 11 / 2014

Transaction ID : SB21B-245612

Amount of Each Disbursement this Period

67.64

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1087.57

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
Deliveries

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
12 / 11 / 2014

Transaction ID : SB21B-245613

Amount of Each Disbursement this Period

36.62

Full Name (Last, First, Middle Initial)

B. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
Deliveries

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
12 / 11 / 2014

Transaction ID : SB21B-245614

Amount of Each Disbursement this Period

50.47

Full Name (Last, First, Middle Initial)

C. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
Deliveries

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
12 / 11 / 2014

Transaction ID : SB21B-245615

Amount of Each Disbursement this Period

118.74

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

205.83

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement Deliveries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245616

Amount of Each Disbursement this Period

368.69

Full Name (Last, First, Middle Initial)

B. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement Deliveries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245618

Amount of Each Disbursement this Period

70.87

Full Name (Last, First, Middle Initial)

C. Leigh Warren

Mailing Address 3023 S Columbus St

City Arlington State VA Zip Code 22206

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B-245619

Amount of Each Disbursement this Period

108.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

547.56

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Wellmade Design Co.

Mailing Address 211 Tennessee Avenue

City Alexandria State VA Zip Code 22305

Purpose of Disbursement
Design/Graphics

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB21B-245620

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. Jessica O'Connell

Mailing Address 1524 D Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB21B-245854

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address P.O. BOX 842854

City Boston State MA Zip Code 02284

Purpose of Disbursement
Taxes - Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : SB21B-245827

Amount of Each Disbursement this Period

96325.23

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

103825.23

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jane Beard

Mailing Address 614 Kenyon Street NW

City Washington State DC Zip Code 20010

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245756

Amount of Each Disbursement this Period

1629.37

Full Name (Last, First, Middle Initial)

B. Liana Eisman

Mailing Address 2801 Connecticut Ave NW Apt 13

City Washington State DC Zip Code 20008

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245757

Amount of Each Disbursement this Period

1321.72

Full Name (Last, First, Middle Initial)

C. Ellen R Malcolm

Mailing Address 5060 Linnean Avenue, NW

City Washington, State DC Zip Code 20008

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245758

Amount of Each Disbursement this Period

992.14

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3943.23

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jessica O'Connell		Date of Disbursement MM / DD / YYYY 12 / 15 / 2014
Mailing Address 1524 D Street SE		Transaction ID : SB21B-245759
City Washington	State DC	
Purpose of Disbursement Salaries	Candidate Name	Amount of Each Disbursement this Period 5465.49
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Stephanie Schriock		Date of Disbursement MM / DD / YYYY 12 / 15 / 2014
Mailing Address 3225 Valley Drive		Transaction ID : SB21B-245760
City Alexandria	State VA	
Purpose of Disbursement Salaries	Candidate Name	Amount of Each Disbursement this Period 7687.73
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Erica Best		Date of Disbursement MM / DD / YYYY 12 / 15 / 2014
Mailing Address 221 Seaton Place, NE		Transaction ID : SB21B-245761
City Washington	State DC	
Purpose of Disbursement Salaries	Candidate Name	Amount of Each Disbursement this Period 1340.69
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)..... ▶	14493.91
TOTAL This Period (last page this line number only)..... ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Arnetia Fogg		Date of Disbursement MM / DD / YYYY 12 / 15 / 2014
Mailing Address 1000 Mandarin Drive		Transaction ID : SB21B-245762
City Upper Marlboro	State MD	
Zip Code 20774	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 1001.91
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Eun Young Park		Date of Disbursement MM / DD / YYYY 12 / 15 / 2014
Mailing Address 1600 S. Eads Street Apt 1205N		Transaction ID : SB21B-245763
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 1019.88
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Camille Sanders		Date of Disbursement MM / DD / YYYY 12 / 15 / 2014
Mailing Address 1103 Glen Willow Drive #13		Transaction ID : SB21B-245764
City Capitol Heights	State MD	
Zip Code 20743	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 1725.30
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

3747.09

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Melanie Smith

Mailing Address 2100 Connecticut Ave, NW
Apartment 609

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245765

Amount of Each Disbursement this Period

1472.07

Category/
Type

Full Name (Last, First, Middle Initial)

B. Lauren Williams

Mailing Address 3261 Pony Ridge Way

City Oakton State VA Zip Code 22124

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245766

Amount of Each Disbursement this Period

765.42

Category/
Type

Full Name (Last, First, Middle Initial)

C. Alyssa Barnum

Mailing Address 3500 13th Street NW
#208

City Washington State DC Zip Code 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245767

Amount of Each Disbursement this Period

2647.25

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4884.74

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Emily Beardsley

Mailing Address 1451 Park Road NW
#313

City Washington State DC Zip Code 20036

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245768

Amount of Each Disbursement this Period

1514.44

Full Name (Last, First, Middle Initial)

B. Lizzie Cooper

Mailing Address 945 Route 35

City Cross River State NY Zip Code 10518

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245769

Amount of Each Disbursement this Period

2939.27

Full Name (Last, First, Middle Initial)

C. Louisa Whitney

Mailing Address 1701 16th Street NW
Apartment 721

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245770

Amount of Each Disbursement this Period

4269.19

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8722.90

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Allison Frederick

Mailing Address 3915 Cameron St
Apt 107

City Dumfries State VA Zip Code 22026

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245771

Amount of Each Disbursement this Period

1157.30

Full Name (Last, First, Middle Initial)

B. Anna Lidman

Mailing Address 37 Brookview Terrace

City Portland State ME Zip Code 04102

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245772

Amount of Each Disbursement this Period

3446.45

Full Name (Last, First, Middle Initial)

C. Michelle Ortiz

Mailing Address 2801 Turk Blvd #306

City San Francisco State CA Zip Code 94118

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245773

Amount of Each Disbursement this Period

2827.17

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7430.92

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Andrea Pagano Reyes

Mailing Address 4501 Connecticut Ave, NW #723

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245774

Amount of Each Disbursement this Period

2584.29

Full Name (Last, First, Middle Initial)

B. Pat Reyes

Mailing Address 2601 Glenview Rd

City Glenview State IL Zip Code 60025

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245775

Amount of Each Disbursement this Period

3033.47

Full Name (Last, First, Middle Initial)

C. Laura Rose Wilson

Mailing Address 8100 N. Madrone Trail

City Austin State TX Zip Code 78737

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245776

Amount of Each Disbursement this Period

2316.16

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7933.92

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Marissa Strickfaden

Mailing Address 1100 First Street, SE
Apt 511

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2014

Transaction ID : SB21B-245777

Amount of Each Disbursement this Period

1628.49

Full Name (Last, First, Middle Initial)

B. Hannah Truslow

Mailing Address 809 6th Street NW
Apt. 52

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2014

Transaction ID : SB21B-245778

Amount of Each Disbursement this Period

875.94

Full Name (Last, First, Middle Initial)

C. Kristin White

Mailing Address 9020 Mountain Valley Road

City Fairfax State VA Zip Code 22039

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2014

Transaction ID : SB21B-245779

Amount of Each Disbursement this Period

998.18

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3502.61

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Kelsey Colon

Mailing Address 450 Taylor Street NE
Apt F11

City Washington State DC Zip Code 20017

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : SB21B-245780

Amount of Each Disbursement this Period

1331.67

Full Name (Last, First, Middle Initial)

B. Robert Courtney

Mailing Address 1619 Swan Street NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : SB21B-245781

Amount of Each Disbursement this Period

1772.63

Full Name (Last, First, Middle Initial)

C. Alyssa Franke

Mailing Address 4012 47th Street NW
Apt 4

City Washington State DC Zip Code 20016

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : SB21B-245782

Amount of Each Disbursement this Period

1055.98

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4160.28

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Malinda Frevert

Mailing Address 769 Mohawk St.

City Columbus State OH Zip Code 43206

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245783

Amount of Each Disbursement this Period

1973.25

Full Name (Last, First, Middle Initial)

B. Jane Hughes

Mailing Address 1028 31st Street NW

City Washington State DC Zip Code 20007

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245784

Amount of Each Disbursement this Period

1725.58

Full Name (Last, First, Middle Initial)

C. Jenna Lowenstein

Mailing Address 389 Rhode Island Ave NW Apt 6

City Washington State DC Zip Code 20001

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245785

Amount of Each Disbursement this Period

3219.64

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6918.47

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Priyanka Mantha

Mailing Address 3314 Mt. Pleasant St NW
Apt 37

City Washington State DC Zip Code 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245786

Amount of Each Disbursement this Period

1271.52

Full Name (Last, First, Middle Initial)

B. Jessica McIntosh

Mailing Address 1700 Kalorama Road
#404

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245787

Amount of Each Disbursement this Period

2635.98

Full Name (Last, First, Middle Initial)

C. Alison McQuade

Mailing Address 320 23rd Street South
#1526

City Arlington State VA Zip Code 22202

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245788

Amount of Each Disbursement this Period

1862.75

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5770.25

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jennifer Medeiros

Mailing Address 2929 Connecticut Ave. NW
Apt 508

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245789

Amount of Each Disbursement this Period

1065.89

Full Name (Last, First, Middle Initial)

B. Sarah Pierz

Mailing Address 925 25th St NW
Apt 316

City Washington State DC Zip Code 20037

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245790

Amount of Each Disbursement this Period

1340.42

Full Name (Last, First, Middle Initial)

C. Marciann Stech

Mailing Address 2026 16th Street, NW
Apt 3

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245791

Amount of Each Disbursement this Period

1982.93

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4389.24

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jessica Byrd

Mailing Address 626 S Street NW
Apt 303

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245792

Amount of Each Disbursement this Period

1802.97

Full Name (Last, First, Middle Initial)

B. Sreyashe Dhar

Mailing Address 14 16th Street SW

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245793

Amount of Each Disbursement this Period

1101.15

Full Name (Last, First, Middle Initial)

C. Xakota Espinoza

Mailing Address 1119 Euclid Street NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245794

Amount of Each Disbursement this Period

1041.21

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3945.33

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Denise Feriozzi

Mailing Address 1363 E Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : **SB21B-245795**

Amount of Each Disbursement this Period

4202.58

Full Name (Last, First, Middle Initial)

B. Lucinda Guinn

Mailing Address 1425 11th Street NW #104

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : **SB21B-245796**

Amount of Each Disbursement this Period

2600.82

Full Name (Last, First, Middle Initial)

C. Heather Kashner

Mailing Address 13 Salmon Run

City Camden State ME Zip Code 04843

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : **SB21B-245797**

Amount of Each Disbursement this Period

3171.82

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9975.22

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Ashely Lough

Mailing Address 326 F Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245798

Amount of Each Disbursement this Period

1373.68

Full Name (Last, First, Middle Initial)

B. Michele McGrorty

Mailing Address 4704 Gordon Avenue

City Monona State WI Zip Code 53716

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245799

Amount of Each Disbursement this Period

1074.32

Full Name (Last, First, Middle Initial)

C. Heather Owens

Mailing Address 114 Colonial Avenue

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245800

Amount of Each Disbursement this Period

1707.19

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4155.19

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tori Taylor

Mailing Address 470 Taylor Street, NE
Apt H-22

City Washington State DC Zip Code 20017

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245801

Amount of Each Disbursement this Period

1217.78

Category/
Type

Full Name (Last, First, Middle Initial)

B. Daniella Urbina

Mailing Address 103 G Street, SW
Apt. 219B

City Washington State DC Zip Code 20024

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245802

Amount of Each Disbursement this Period

1194.57

Category/
Type

Full Name (Last, First, Middle Initial)

C. Muthoni Wambu

Mailing Address 1215 Dexter Ave N
Apt 636

City Seattle State WA Zip Code 98109

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245803

Amount of Each Disbursement this Period

3084.53

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5496.88

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Catherine Loeffelman		Date of Disbursement MM / DD / YYYY 12 / 15 / 2014
Mailing Address 1811 Wyoming Ave. NW. Apt 1		Transaction ID : SB21B-245804
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 2581.20
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. William Rusche		Date of Disbursement MM / DD / YYYY 12 / 15 / 2014
Mailing Address 300 Mass Ave NW Apt 34		Transaction ID : SB21B-245805
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 974.55
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Eric Smith		Date of Disbursement MM / DD / YYYY 12 / 15 / 2014
Mailing Address 130 M Street NE Apt 413		Transaction ID : SB21B-245806
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 1232.52
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4788.27
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Emily Campbell

Mailing Address 554 Halloran Springs Road

City Las Vegas State NV Zip Code 89148

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245807

Amount of Each Disbursement this Period

2928.67

Full Name (Last, First, Middle Initial)

B. Natalie Cone

Mailing Address 6515 Belcrest Road
Apartment 1608B

City Hyattsville State MD Zip Code 20782

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245808

Amount of Each Disbursement this Period

983.07

Full Name (Last, First, Middle Initial)

C. Garrick Delzell

Mailing Address 415 Oak Grove St, #521

City Minneapolis State MN Zip Code 55403

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245809

Amount of Each Disbursement this Period

2624.30

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6536.04

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Peggy Egan

Mailing Address 20518 East Shore, Hwy 35

City Bigfork State MT Zip Code 59911

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2014

Transaction ID : SB21B-245810

Amount of Each Disbursement this Period

2618.84

Full Name (Last, First, Middle Initial)

B. Alex Glass

Mailing Address 1412 15th Street NW
#5

City Washington State DC Zip Code 20005

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2014

Transaction ID : SB21B-245811

Amount of Each Disbursement this Period

2440.33

Full Name (Last, First, Middle Initial)

C. Hillary Nachem

Mailing Address 1216 D Street SE #2

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2014

Transaction ID : SB21B-245812

Amount of Each Disbursement this Period

2147.11

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7206.28

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Samuel Nitz

Mailing Address 1200 N Street, NW
#608

City Washington State DC Zip Code 20005

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245813

Amount of Each Disbursement this Period

2067.48

Full Name (Last, First, Middle Initial)

B. Jonathan Parker

Mailing Address 1611 Hobart Street NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245814

Amount of Each Disbursement this Period

4613.21

Full Name (Last, First, Middle Initial)

C. Jessica Post

Mailing Address 355 I Street, SW
#S620

City Washington State DC Zip Code 20024

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245815

Amount of Each Disbursement this Period

2649.97

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9330.66

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Devin Rankin

Mailing Address 2112 O Street, NW
#3

City Washington State DC Zip Code 20037

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245816

Amount of Each Disbursement this Period

2338.46

Full Name (Last, First, Middle Initial)

B. Mary Jane Volk

Mailing Address 541 E. Nelson Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245817

Amount of Each Disbursement this Period

3390.06

Full Name (Last, First, Middle Initial)

C. SaBrina Brown

Mailing Address 3730 5th St.

City North Beach State MD Zip Code 20714

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245818

Amount of Each Disbursement this Period

3799.43

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9527.95

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Lesbia Cajchun

Mailing Address 2902 Kings Chapel Rd, #7

City Falls Church State VA Zip Code 22042

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : SB21B-245819

Amount of Each Disbursement this Period

2124.60

Full Name (Last, First, Middle Initial)

B. Caroline Fines

Mailing Address 10621 Regent Park Court

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : SB21B-245820

Amount of Each Disbursement this Period

2523.78

Full Name (Last, First, Middle Initial)

C. Sarah Hasenfuss

Mailing Address 1 Scott Circle NW
Apt 414

City Washington State DC Zip Code 20036

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : SB21B-245821

Amount of Each Disbursement this Period

1031.21

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5679.59

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Ray Keating

Mailing Address 816 Lucky Rd

City State Zip Code
Severn MD 21144

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245822

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Victoria Kempter

Mailing Address 4306 Alton PI NW

City State Zip Code
Washington DC 20016

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245823

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Sanskruti Majmudar

Mailing Address 3754 McKinley Street NW

City State Zip Code
Washington DC 20015

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245824

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Leigh Warren

Mailing Address 3023 S Columbus St

City Arlington State VA Zip Code 22206

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245825

Amount of Each Disbursement this Period

3028.61

Full Name (Last, First, Middle Initial)

B. Kate Watts

Mailing Address 1425 4th Street, SW
Apt. A217

City Washington State DC Zip Code 20024

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245826

Amount of Each Disbursement this Period

1181.35

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 730 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SB21B-245842

Amount of Each Disbursement this Period

1761.96

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5971.92

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. John Hancock c/o City Bank Delaware

Mailing Address 1615 Brett Road Lock Box 7122

City New Castle State DE Zip Code 19720

Purpose of Disbursement
Employment Pension/ 401(k)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2014

Transaction ID : SB21B-245856

Amount of Each Disbursement this Period

13882.37

Full Name (Last, First, Middle Initial)

B. Discovery Benefits, Inc.

Mailing Address 3216 13th Avenue South

City Fargo State ND Zip Code 58103

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245846

Amount of Each Disbursement this Period

809.53

Full Name (Last, First, Middle Initial)

C. Paypal

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245848

Amount of Each Disbursement this Period

183.49

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

14875.39

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Michelle McGroarty		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 4704 Gordon Avenue		Transaction ID : SB21B-245630
City Monona	State WI	
Purpose of Disbursement Void Check		Amount of Each Disbursement this Period -129.17
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. Anzalone Liszt Research, Inc		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 260 Commerce Street-4th Floor		Transaction ID : SB21B-245631
City Montgomery	State AL	
Purpose of Disbursement Polling/Surveys		Amount of Each Disbursement this Period 58300.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) C. Allied Printing Resources		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 33 Commerce Road		Transaction ID : SB21B-245632
City Carlstadt	State NJ	
Purpose of Disbursement Printing		Amount of Each Disbursement this Period 1545.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	59715.83
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Bulletproof

Mailing Address 1840 41st Ave, #102-333

City State Zip Code
Capitola CA 95010

Purpose of Disbursement
Direct Mail Production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245634

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. Bulletproof

Mailing Address 1840 41st Ave, #102-333

City State Zip Code
Capitola CA 95010

Purpose of Disbursement
Direct Mail Production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245635

Amount of Each Disbursement this Period

37.50

Full Name (Last, First, Middle Initial)

C. Bulletproof

Mailing Address 1840 41st Ave, #102-333

City State Zip Code
Capitola CA 95010

Purpose of Disbursement
Direct Mail Production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245636

Amount of Each Disbursement this Period

37.50

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

225.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Bulletproof

Mailing Address 1840 41st Ave, #102-333

City State Zip Code
Capitola CA 95010

Purpose of Disbursement
Copy Writer

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245637

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Care First Blue Cross Blue Sheild

Mailing Address PO Box 79749

City State Zip Code
Baltimore MD 21279

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245639

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Care First Blue Cross Blue Sheild

Mailing Address PO Box 79749

City State Zip Code
Baltimore MD 21279

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245640

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Direct Marketing Assoc of Washington

Mailing Address 11709 Bowman Green Drive

City Reston State VA Zip Code 20190

Purpose of Disbursement
Employee Training/ Planning

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245641

Amount of Each Disbursement this Period

1320.00

Full Name (Last, First, Middle Initial)

B. Doyle Printing and Offset Co

Mailing Address 5206 46th Ave

City Hyattsville State MD Zip Code 20781

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245642

Amount of Each Disbursement this Period

16.39

Full Name (Last, First, Middle Initial)

C. Doyle Printing and Offset Co

Mailing Address 5206 46th Ave

City Hyattsville State MD Zip Code 20781

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
12 / 18 / 2014

Transaction ID : SB21B-245643

Amount of Each Disbursement this Period

1432.92

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2769.31

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Xakota Espinoza

Mailing Address 1119 Euclid Street NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245644

Amount of Each Disbursement this Period

20.07

Full Name (Last, First, Middle Initial)

B. Rob Flaherty

Mailing Address 1400 Irving St. NW
Apt 515

City Washington State DC Zip Code 20010

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245645

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

C. Geiger

Mailing Address PO Box 712144

City Cincinnati State OH Zip Code 45271

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245646

Amount of Each Disbursement this Period

1154.14

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1624.21

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Geiger

Mailing Address PO Box 712144

City Cincinnati State OH Zip Code 45271

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245647

Amount of Each Disbursement this Period

1147.45

Full Name (Last, First, Middle Initial)

B. Kastle Key Systems

Mailing Address PO Box 75151

City Baltimore State MD Zip Code 21275-5151

Purpose of Disbursement
Building Utilities & Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245648

Amount of Each Disbursement this Period

314.08

Full Name (Last, First, Middle Initial)

C. Michelle McGroarty

Mailing Address 4704 Gordon Avenue

City Monona State WI Zip Code 53716

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245649

Amount of Each Disbursement this Period

129.17

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1590.70

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jessica McIntosh

Mailing Address 1700 Kalorama Road
#404

City Washington State DC Zip Code 20009

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245650

Amount of Each Disbursement this Period

93.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Alison McQuade

Mailing Address 320 23rd Street South
#1526

City Arlington State VA Zip Code 22202

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245651

Amount of Each Disbursement this Period

34.09

Category/
Type

Full Name (Last, First, Middle Initial)

C. Miller's Office Products, Inc.

Mailing Address PO Box 1537

City Newington State VA Zip Code 22122

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245653

Amount of Each Disbursement this Period

95.92

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

223.01

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Miller's Office Products, Inc.

Mailing Address PO Box 1537

City Newington State VA Zip Code 22122

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245654

Amount of Each Disbursement this Period

1050.82

Full Name (Last, First, Middle Initial)

B. Hilary Nachem

Mailing Address 1216 D St SE #2

City Washington State DC Zip Code 20003

Purpose of Disbursement
Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245655

Amount of Each Disbursement this Period

50.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. Sprint PCS

Mailing Address P.O. Box 62071

City Baltimore State MD Zip Code 21264-2071

Purpose of Disbursement
Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245655-10000

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1100.82

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NGP VAN, Inc

Mailing Address 1101 15th Street, NW
Ste 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Computer Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245656

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

B. NGP VAN, Inc

Mailing Address 1101 15th Street, NW
Ste 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Computer Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245657

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Park America, Inc. Attn: Helmuth Michel

Mailing Address 1800 M Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Parking

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245659

Amount of Each Disbursement this Period

705.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

4155.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tri-State Envelope Corporation

Mailing Address PO Box 433

City State Zip Code
Beltsville MD 20704

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
12 / 18 / 2014

Transaction ID : SB21B-245660

Amount of Each Disbursement this Period

12470.60

Full Name (Last, First, Middle Initial)

B. Vail Systems, Inc

Mailing Address 570 Lake Cook Road
Suite 400

City State Zip Code
Deerfield IL 60015

Purpose of Disbursement
Phone Banks

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245661

Amount of Each Disbursement this Period

4017.29

Full Name (Last, First, Middle Initial)

C. Mary Jane Volk

Mailing Address 541 E. Nelson Avenue

City State Zip Code
Alexandria VA 22301

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245662

Amount of Each Disbursement this Period

45.64

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

16533.53

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Leigh Warren

Mailing Address 3023 S Columbus St

City Arlington State VA Zip Code 22206

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245663

Amount of Each Disbursement this Period

77.00

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address Suite 0001

City Chicago State IL Zip Code 60679-0001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245666

Amount of Each Disbursement this Period

384.62

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. RD CTR

Mailing Address 233 PEACHTREE

City ATLANTA State GA Zip Code 30303-3732

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245666-10000

Amount of Each Disbursement this Period

7.55

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

461.62

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FAMOUS FAMIGLIA

Mailing Address REAGAN WASHIN

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245666-20000

Amount of Each Disbursement this Period

10.98

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MANUEL'S TAVERN

Mailing Address 602 N HIGHLAN

City ATLANTA State GA Zip Code 30307-1433

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245666-30000

Amount of Each Disbursement this Period

26.17

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HYATT REGENCY ATLANTA

Mailing Address 265 PEACHTREE

City ATLANTA State GA Zip Code 30303-1204

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245666-40000

Amount of Each Disbursement this Period

281.54

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Catering/Facilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245667

Amount of Each Disbursement this Period

132.42

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. SUBWAY 1943

Mailing Address 830 N RANCHO

City LAS VEGAS State NV Zip Code 89106-3709

Purpose of Disbursement
Catering/Facilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245667-10000

Amount of Each Disbursement this Period

132.42

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245668

Amount of Each Disbursement this Period

2313.78

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2446.20

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS A CONC003227155

Mailing Address SEA-TAC INT'L

City SEATTLE State WA Zip Code 98158

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245668-10000

Amount of Each Disbursement this Period

4.33

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AVIS RENT A CAR CORP

Mailing Address SEND ALL MAIL

City GARDEN CITY State NY Zip Code 11530

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245668-20000

Amount of Each Disbursement this Period

196.41

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WENDYS 9038

Mailing Address 3400 E SKY HA

City PHOENIX State AZ Zip Code 85034-4403

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245668-30000

Amount of Each Disbursement this Period

3.35

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. LOLA RESTAURANT

Mailing Address 2000 4TH AVE

City SEATTLE State WA Zip Code 98121-2415

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245668-40000

Amount of Each Disbursement this Period

54.99

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RENAISSANCE PHOENIX DT

Mailing Address 50 E ADAMS ST

City PHOENIX State AZ Zip Code 85004-2329

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245668-50000

Amount of Each Disbursement this Period

793.24

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245668-60000

Amount of Each Disbursement this Period

28.65

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. DNGNSS BY FD HUS003227832		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address SEA-TAC INT'L		Transaction ID : SB21B-245668-10000
City SEATTLE	State WA	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 28.38
Candidate Name		[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. SUSHI HOUSE GOYEMON		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 5255 DECATUR		Transaction ID : SB21B-245668-110000
City LAS VEGAS	State NV	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 257.17
Candidate Name		[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. STARBUCKS 2778		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address RANCHO & BONA		Transaction ID : SB21B-245668-120000
City LAS VEGAS	State NV	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 48.48
Candidate Name		[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 2778

Mailing Address RANCHO & BONA

City LAS VEGAS State NV Zip Code 89106

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245668-130000

Amount of Each Disbursement this Period

7.03

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245668-140000

Amount of Each Disbursement this Period

39.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FAMILY DOLLAR #6414

Mailing Address RANCHO CENTER

City LAS VEGAS State NV Zip Code 89106

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245668-150000

Amount of Each Disbursement this Period

14.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. PELLEGRINI PIZZA

Mailing Address 101 S RAINBOW

City LAS VEGAS State NV Zip Code 89107

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245668-160000

Amount of Each Disbursement this Period

36.18

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. THE STONE HOUSE CAFE

Mailing Address 1907 S ARLING

City RENO State NV Zip Code 89509

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245668-170000

Amount of Each Disbursement this Period

44.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DOWNTOWN GRAND HOTEL

Mailing Address 206 N THIRD S

City LAS VEGAS State NV Zip Code 89101

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245668-180000

Amount of Each Disbursement this Period

58.87

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AVIS RENT A CAR CORP

Mailing Address SEND ALL MAIL

City GARDEN CITY State NY Zip Code 11530

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245668-190000

Amount of Each Disbursement this Period

142.26

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FAMOUS FOOD TRUCK

Mailing Address 4925 KIETZKE

City RENO State NV Zip Code 89509

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245668-200000

Amount of Each Disbursement this Period

9.62

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245668-210000

Amount of Each Disbursement this Period

69.95

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. LODGING TRANSACTION

Mailing Address 12202 AIRPORT

City BROOMFIELD State CO Zip Code 80021-2596

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245668-220000

Amount of Each Disbursement this Period

105.40

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT TRANSACTION

Mailing Address 12202 AIRPORT

City BROOMFIELD State CO Zip Code 80021-2596

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245668-230000

Amount of Each Disbursement this Period

56.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT TRANSACTION

Mailing Address 12202 AIRPORT

City BROOMFIELD State CO Zip Code 80021-2596

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245668-240000

Amount of Each Disbursement this Period

4.73

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. YELLOW CARD SERVICES INC

Mailing Address 74 SOUTH HUDS

City SEATTLE State WA Zip Code 98134

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245668-250000

Amount of Each Disbursement this Period

58.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AVIS RENT A CAR CORP

Mailing Address SEND ALL MAIL

City GARDEN CITY State NY Zip Code 11530

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245668-260000

Amount of Each Disbursement this Period

183.43

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RNO WILD GARLIC C 2601382

Mailing Address RENO TAHOE IN

City RENO State NV Zip Code 89502

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245668-270000

Amount of Each Disbursement this Period

10.55

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ALASKA AIRLINES

Mailing Address 20833 INTERNA

City SEATTLE State WA Zip Code 98198-5950

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245668-280000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UNITED PARKING #A802

Mailing Address 202 OCCIDENTA

City SEATTLE State WA Zip Code 98121

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245668-290000

Amount of Each Disbursement this Period

18.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address Po Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Catering/Facilities

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245669

Amount of Each Disbursement this Period

673.35

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

673.35

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. 19TH & L-CORNER BAKERY179

Mailing Address 1828 L ST NW

City WASHINGTON State DC Zip Code 20036-5123

Purpose of Disbursement
Catering/Facilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245669-10000

Amount of Each Disbursement this Period

135.09

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. POTBELLY SANDWICH WORKS

Mailing Address 1900 L ST NW

City WASHINGTON State DC Zip Code 20036-5002

Purpose of Disbursement
Catering/Facilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245669-20000

Amount of Each Disbursement this Period

538.26

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address Po Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245670

Amount of Each Disbursement this Period

52.86

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

52.86

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245670-10000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address Po Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245671

Amount of Each Disbursement this Period

515.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. GOOGLE ADWORDS

Mailing Address 1600 AMPHITHE

City MOUNTAIN VIEW State CA Zip Code 94043-1351

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245671-10000

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

515.00

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Twitter Counter

Mailing Address SUBMISSIONS U

City State Zip Code
USA

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245671-20000

Amount of Each Disbursement this Period

3236.32

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address Po Box 360001

City State Zip Code
Ft. Lauderdale FL 33336-0001

Purpose of Disbursement
Office Supplies Expenses/Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245672

Amount of Each Disbursement this Period

3236.32

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. SHOEBUYCOM INC

Mailing Address 101 ARCH ST

City State Zip Code
BOSTON MA 02110-1156

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245672-10000

Amount of Each Disbursement this Period

87.95

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3236.32

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2145 HAMILTON

City SAN JOSE State CA Zip Code 95125-5905

Purpose of Disbursement
Office Supplies Expenses

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
12 / 18 / 2014

Transaction ID : SB21B-245672-20000

Amount of Each Disbursement this Period

89.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Paypal

Mailing Address 2145 HAMILTON

City SAN JOSE State CA Zip Code 95125-5905

Purpose of Disbursement
Office Supplies Expenses

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
12 / 18 / 2014

Transaction ID : SB21B-245672-30000

Amount of Each Disbursement this Period

34.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. EFAXCOM

Mailing Address 6922 HOLLYWOO

City LOS ANGELES State CA Zip Code 90028-6129

Purpose of Disbursement
Office Supplies Expenses

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
12 / 18 / 2014

Transaction ID : SB21B-245672-40000

Amount of Each Disbursement this Period

16.95

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DAILY GRILL

Mailing Address 1200 18TH ST

City WASHINGTON State DC Zip Code 20036-2535

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245672-50000

Amount of Each Disbursement this Period

54.05

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245672-60000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245672-70000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245672-110000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245672-120000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245672-130000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245672-140000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245672-150000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245672-160000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245672-170000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245672-180000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245672-190000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

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
12			18			2014			

Transaction ID : SB21B-245672-200000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

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
12			18			2014			

Transaction ID : SB21B-245672-210000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

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
12			18			2014			

Transaction ID : SB21B-245672-220000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245672-230000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245672-240000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245672-250000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

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
12			18			2014			

Transaction ID : SB21B-245672-260000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

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
12			18			2014			

Transaction ID : SB21B-245672-270000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

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
12			18			2014			

Transaction ID : SB21B-245672-280000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

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
12 / 18 / 2014

Transaction ID : SB21B-245672-290000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

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
12 / 18 / 2014

Transaction ID : SB21B-245672-300000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

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
12 / 18 / 2014

Transaction ID : SB21B-245672-310000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245672-320000

Amount of Each Disbursement this Period

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245672-330000

Amount of Each Disbursement this Period

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245672-340000

Amount of Each Disbursement this Period

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 18 / 2014

Transaction ID : SB21B-245672-350000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 18 / 2014

Transaction ID : SB21B-245672-360000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Dues/Subscriptions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 18 / 2014

Transaction ID : SB21B-245672-370000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CVS/PHARMACY #02317

Mailing Address ANNANDALE RD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245672-380000

Amount of Each Disbursement this Period

4.76

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Sarah's Hat Boxes

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245672-390000

Amount of Each Disbursement this Period

69.61

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address Po Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245673

Amount of Each Disbursement this Period

49.00

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

49.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CAPITAL

Mailing Address 900 BRENTWOOD

City WASHINGTON State DC Zip Code 20066-9201

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245673-10000

Amount of Each Disbursement this Period

49.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address Po Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245674

Amount of Each Disbursement this Period

4959.67

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. FOUNDATION CENTER - SUBS

Mailing Address 79 5TH AVE

City NEW YORK State NY Zip Code 10003-3076

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245674-10000

Amount of Each Disbursement this Period

19.95

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4959.67

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. LEXIS-NEXIS

Mailing Address 9393 SPRINGBO

City MIAMISBURG State OH Zip Code 45342-4424

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245674-20000

Amount of Each Disbursement this Period

4739.72

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Share Progress

Mailing Address 3180 18TH ST

City SAN FRANCISCO State CA Zip Code 94110-2043

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245674-30000

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address Po Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245675

Amount of Each Disbursement this Period

1592.75

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1592.75

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NOOSHI

Mailing Address 1120 19TH ST

City WASHINGTON State DC Zip Code 20036-3686

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245675-10000

Amount of Each Disbursement this Period

41.87

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245675-20000

Amount of Each Disbursement this Period

22.41

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. TOPAZ HOTEL

Mailing Address 1733 N ST NW

City WASHINGTON State DC Zip Code 20036-2801

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245675-30000

Amount of Each Disbursement this Period

273.66

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AMAZON MARKEPLACE NA - PA

Mailing Address 440 TERRY AVE

City SEATTLE State WA Zip Code 98109-5210

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245675-40000

Amount of Each Disbursement this Period

185.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245675-50000

Amount of Each Disbursement this Period

17.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. TRADER JOES 653

Mailing Address 1101 25TH ST

City WASHINGTON State DC Zip Code 20037-1407

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245675-60000

Amount of Each Disbursement this Period

23.41

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245675-70000

Amount of Each Disbursement this Period

27.58

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SHERATON NY HOTEL TIMES S

Mailing Address 811 7TH AVE

City NEW YORK State NY Zip Code 10019-6002

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245675-80000

Amount of Each Disbursement this Period

828.33

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DAILY GRILL

Mailing Address 1200 18TH ST

City WASHINGTON State DC Zip Code 20036-2535

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245675-90000

Amount of Each Disbursement this Period

59.17

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. 19TH & L-CORNER BAKERY179

Mailing Address 1828 L ST NW

City WASHINGTON State DC Zip Code 20036-5123

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245675-10000**

Amount of Each Disbursement this Period: 56.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
B. PARTY CITY 1002 ECOMMERCE

Mailing Address 2727 DIEHL RD

City NAPERVILLE State IL Zip Code 60563

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245675-110000**

Amount of Each Disbursement this Period: 56.91

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
C. American Express

Mailing Address Po Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245676**

Amount of Each Disbursement this Period: 2401.50

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2401.50

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WA METRO SMART BENEFITS

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245676-10000

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WA METRO SMART BENEFITS

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245676-20000

Amount of Each Disbursement this Period

350.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WA METRO SMART BENEFITS

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245676-30000

Amount of Each Disbursement this Period

320.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WA METRO SMART BENEFITS

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245676-40000**

Amount of Each Disbursement this Period

286.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WA METRO SMART BENEFITS

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245676-50000**

Amount of Each Disbursement this Period

260.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WA METRO SMART BENEFITS

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245676-60000**

Amount of Each Disbursement this Period

320.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WA METRO SMART BENEFITS

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245676-70000**

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WA METRO SMART BENEFITS

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245676-80000**

Amount of Each Disbursement this Period

155.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WA METRO SMART BENEFITS

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245676-90000**

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WA METRO SMART BENEFITS

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245676-10000**

Amount of Each Disbursement this Period

110.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WA METRO SMART BENEFITS

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245676-11000**

Amount of Each Disbursement this Period

110.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245677**

Amount of Each Disbursement this Period

4116.97

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4116.97

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SERVICES

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-10000

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FOUR SEASONS HOTEL F & B

Mailing Address 2800 PENNSYLV

City WASHINGTON State DC Zip Code 20007-3717

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-20000

Amount of Each Disbursement this Period

12.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SERVICES

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-30000

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-40000

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-50000

Amount of Each Disbursement this Period

83.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DRYBAR

Mailing Address 123 KEARNY ST

City SAN FRANCISCO State CA Zip Code 94108

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-60000

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RADISSON HOTEL MANCHESTER

Mailing Address 700 ELM ST

City MANCHESTER State NH Zip Code 03101-2599

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245677-70000

Amount of Each Disbursement this Period

124.59

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245677-80000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS DIRECT SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245677-90000

Amount of Each Disbursement this Period

196.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS DIRECT SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245677-10000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HILTON GARDEN INN F & B

Mailing Address 100 HIGH ST

City PORTSMOUTH State NH Zip Code 03801-3709

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245677-110000

Amount of Each Disbursement this Period

33.23

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HILTON GARDEN INN

Mailing Address 100 HIGH ST

City PORTSMOUTH State NH Zip Code 03801-3709

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245677-120000

Amount of Each Disbursement this Period

234.91

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HESS 21333

Mailing Address 41 LEE BURBAN

City REVERE State MA Zip Code 02151-4001

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245677-130000

Amount of Each Disbursement this Period

13.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS 300254

Mailing Address 103 BROAD ST

City NASHUA State NH Zip Code 03064-2050

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245677-140000

Amount of Each Disbursement this Period

10.27

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GULF OIL BUILDING

Mailing Address 100 CROSSING

City FRAMINGHAM State MA Zip Code 01702-5401

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245677-150000

Amount of Each Disbursement this Period

38.12

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NATIONAL CAR RENTAL

Mailing Address BOSTON LOGAN

City BOSTON State MA Zip Code 02128

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-190000

Amount of Each Disbursement this Period

116.92

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. METRO WASH AIRPORTS AUTH

Mailing Address GARAGE A

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-200000

Amount of Each Disbursement this Period

66.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SPEAKERS CORNER REST

Mailing Address 2 SOMERSET PK

City NASHUA State NH Zip Code 03063-1969

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-210000

Amount of Each Disbursement this Period

51.49

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245677-220000

Amount of Each Disbursement this Period

44.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BELL WINE & SPIRITS

Mailing Address 1821 M ST NW

City WASHINGTON State DC Zip Code 20036-2503

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245677-230000

Amount of Each Disbursement this Period

128.61

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PIZZA HUT #023569

Mailing Address 1990 M ST NW

City WASHINGTON State DC Zip Code 20036-3433

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245677-240000

Amount of Each Disbursement this Period

111.80

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. PANACHE

Mailing Address 1725 DESALES

City WASHINGTON State DC Zip Code 20036-4406

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-250000

Amount of Each Disbursement this Period

142.90

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DC VIP CAB

Mailing Address 2606 BLADENSB

City WASHINGTON State DC Zip Code 20018-1423

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-260000

Amount of Each Disbursement this Period

24.24

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PANACHE

Mailing Address 1725 DESALES

City WASHINGTON State DC Zip Code 20036-4406

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-270000

Amount of Each Disbursement this Period

111.23

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RIDECHARGE INC

Mailing Address 5904 RICHMOND

City ALEXANDRIA State VA Zip Code 22303-1864

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-280000

Amount of Each Disbursement this Period

20.08

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. NATIONAL CAR RENTAL TOLLS

Mailing Address 66 POWERHOUSE

City ROSLYN HEIGHT State NY Zip Code 11577

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-290000

Amount of Each Disbursement this Period

15.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245677-300000

Amount of Each Disbursement this Period

12.36

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. BAY CAB

Mailing Address BAY CAB

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245677-310000

Amount of Each Disbursement this Period

20.03

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245677-320000

Amount of Each Disbursement this Period

18.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245677-330000

Amount of Each Disbursement this Period

428.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AMTRAK.COM

Mailing Address 60 MASSACHUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245677-340000

Amount of Each Disbursement this Period

104.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CREATIVE MOBILE TECHN CMT

Mailing Address 1151 47TH AVE

City LONG ISLAND C State NY Zip Code 11101-5418

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245677-350000

Amount of Each Disbursement this Period

24.91

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DIYAWARDS.COM

Mailing Address 520 E CENTRAL

City PLANO State TX Zip Code 75074

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245677-360000

Amount of Each Disbursement this Period

179.95

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VTS DISTRICT CAB

Mailing Address VTS DISTRICT

City WASHINGTON State DC Zip Code 20019

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245677-370000

Amount of Each Disbursement this Period

23.27

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DRYBAR UPPER EAST SIDE

Mailing Address 209 E 76TH ST

City NEW YORK State NY Zip Code 10021-2168

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245677-380000

Amount of Each Disbursement this Period

49.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. TORINO

Mailing Address 1700 BROADWAY

City NEW YORK State NY Zip Code 10019-4620

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245677-390000

Amount of Each Disbursement this Period

104.19

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SHERATON NY HOTEL TIMES S

Mailing Address 811 7TH AVE

City NEW YORK State NY Zip Code 10019-6002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245677-400000

Amount of Each Disbursement this Period

507.25

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AMTRAK.COM

Mailing Address 60 MASSACHUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245677-410000

Amount of Each Disbursement this Period

109.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. THE PLAYWRIGHT TAVERN

Mailing Address 202 W 49TH ST

City NEW YORK State NY Zip Code 10019-6810

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245677-420000

Amount of Each Disbursement this Period

84.31

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245678

Amount of Each Disbursement this Period

4390.10

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. VALERO

Mailing Address 9830 COLONNAD

City SAN ANTONIO State TX Zip Code 78230

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245678-10000

Amount of Each Disbursement this Period

32.49

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 6918

Mailing Address 1201 24TH ST

City BAKERSFIELD State CA Zip Code 93301-2384

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245678-20000

Amount of Each Disbursement this Period

4.95

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4390.10

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SQUARE

Mailing Address ST 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-30000

Amount of Each Disbursement this Period

6	.	3	5
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HOMEWOOD SUITES

Mailing Address 1505 MILL ROC

City BAKERSFIELD State CA Zip Code 93311-1346

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-40000

Amount of Each Disbursement this Period

1	3	3	3	.	7	8
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PADRE HOTEL F & B

Mailing Address 1702 18TH ST

City BAKERSFIELD State CA Zip Code 93301-4307

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-50000

Amount of Each Disbursement this Period

2	4	.	1	7
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[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. COSTCO GAS 9300688		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 3800 ROSEDALE		Transaction ID : SB21B-245678-60000
City BAKERSFIELD	State CA	
Zip Code 93308-6235	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 48.20
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. MEXICALI WEST		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 5601 CALIFORN		Transaction ID : SB21B-245678-70000
City BAKERSFIELD	State CA	
Zip Code 93309-1613	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 24.61
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CHIPOTLE 0260		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 4950 STOCKDAL		Transaction ID : SB21B-245678-80000
City BAKERSFIELD	State CA	
Zip Code 93309-2600	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 10.75
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SQUARE

Mailing Address ST 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-90000

Amount of Each Disbursement this Period

11.84

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. EUREKA BURGER BAKERSFIELD

Mailing Address 10520 W STOCK

City BAKERSFIELD State CA Zip Code 93311

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-10000

Amount of Each Disbursement this Period

24.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FLAME SKEWERS - I

Mailing Address 5486 CALIFORN

City BAKERSFIELD State CA Zip Code 93309

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-110000

Amount of Each Disbursement this Period

17.50

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. LASSENS HEALTH FOOD #8

Mailing Address 4308 CALIFORN

City BAKERSFIELD State CA Zip Code 93309-1018

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-120000

Amount of Each Disbursement this Period

22.18

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. COSTCO GAS 9300688

Mailing Address 3800 ROSEDALE

City BAKERSFIELD State CA Zip Code 93308-6235

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-130000

Amount of Each Disbursement this Period

45.46

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DENNY'S 7719

Mailing Address 14390 COUNTY

City DELANO State CA Zip Code 93215-9425

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-140000

Amount of Each Disbursement this Period

18.08

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VONS DIVISION

Mailing Address 4500 COFFEE R

City BAKERSFIELD State CA Zip Code 93308-5025

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245678-150000

Amount of Each Disbursement this Period

30.54

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245678-160000

Amount of Each Disbursement this Period

6.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PILOT 200

Mailing Address 5725 E STATE

City BORON State CA Zip Code 93516-2129

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245678-170000

Amount of Each Disbursement this Period

8.80

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. PILOT 200

Mailing Address 5725 E STATE

City BORON State CA Zip Code 93516-2129

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-180000

Amount of Each Disbursement this Period

44.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DOUBLETREE HOTEL BAKERSFI

Mailing Address 3100 CAMINO D

City BAKERSFIELD State CA Zip Code 93308

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-190000

Amount of Each Disbursement this Period

1547.53

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SHELL OIL

Mailing Address 12700 NORTHBO

City HOUSTON State TX Zip Code 77067-2552

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-200000

Amount of Each Disbursement this Period

5.37

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

--

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WHOLE FOODS MARKETOKS

Mailing Address 740 N MOORPAR

City THOUSAND OAKS State CA Zip Code 91360-3705

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-210000

Amount of Each Disbursement this Period

32.76

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CHEVRON USA

Mailing Address CHEVRON CARD

City SAN RAMON State CA Zip Code 94583

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-220000

Amount of Each Disbursement this Period

30.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SAMMY HAGAR BAR LAS

Mailing Address 5757 WAYNE NE

City LAS VEGAS State NV Zip Code 89111-8037

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-230000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NATIONAL CAR RENTAL

Mailing Address 7135 GILESPIE

City LAS VEGAS State NV Zip Code 89119

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-240000

Amount of Each Disbursement this Period

739.36

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. NATIONAL CAR RENTAL

Mailing Address 9020 AVIATION

City INGLEWOOD State CA Zip Code 90301-2907

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-250000

Amount of Each Disbursement this Period

49.93

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PHILLIPS 66-CONOCO-76 CAT

Mailing Address 411 S KEELER

City BARTLESVILLE State OK Zip Code 74004

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245678-260000

Amount of Each Disbursement this Period

26.50

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DESERT CAB

Mailing Address DESERT CAB

City LAS VEGAS State NV Zip Code 89103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245678-270000

Amount of Each Disbursement this Period

40.56

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. LA PROVENCE CAFE 00325740

Mailing Address 201 WORLD WAY

City LOS ANGELES State CA Zip Code 90045-5807

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245678-280000

Amount of Each Disbursement this Period

11.28

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HAMPTON INN & SUITES THOU

Mailing Address 510 N VENTU P

City NEWBURY PARK State CA Zip Code 91320

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245678-290000

Amount of Each Disbursement this Period

167.16

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245679

Amount of Each Disbursement this Period

7	3	.	1	7
---	---	---	---	---

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. LAT-SUBSCRIPTIONS

Mailing Address 202 W 1ST ST

City LOS ANGELES State CA Zip Code 90012-4105

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245679-10000

Amount of Each Disbursement this Period

7	.	9	6
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WALL ST JOURNAL

Mailing Address 84 SECOND AVE

City CHICOPEE State MA Zip Code 01020

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245679-20000

Amount of Each Disbursement this Period

2	6	.	4	3
---	---	---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7	3	.	1	7
---	---	---	---	---

7	3	.	1	7
---	---	---	---	---

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. BOSTON GLOBE HOME DELPBS

Mailing Address 135 WILLIAM T

City State Zip Code
DORCHESTER MA 02125-3338

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245679-30000

Amount of Each Disbursement this Period

15.96

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WASHINGTON POST DIGITAL S

Mailing Address 1150 15 ST NW

City State Zip Code
WASHINGTON DC 20071-0001

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245679-40000

Amount of Each Disbursement this Period

15.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. LAT-SUBSCRIPTIONS

Mailing Address 202 W 1ST ST

City State Zip Code
LOS ANGELES CA 90012-4105

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245679-50000

Amount of Each Disbursement this Period

6.96

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245680

Amount of Each Disbursement this Period

3291.06

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. BOINGO WIRELESS

Mailing Address 10960 WILSHIR

City LOS ANGELES State CA Zip Code 90024-3711

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245680-10000

Amount of Each Disbursement this Period

9.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BOQUERIA

Mailing Address 1837 M ST NW

City WASHINGTON State DC Zip Code 20036-2552

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245680-20000

Amount of Each Disbursement this Period

93.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3291.06

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MD SAZZADUL ALAM

Mailing Address 70-35 BROADWA

City JACKSON HEIGH State NY Zip Code 11372

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245680-30000

Amount of Each Disbursement this Period

19.35

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DOUBLETREE METROPOLITAN HOTEL

Mailing Address 569 LEXINGTON

City NEW YORK State NY Zip Code 10022-7562

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245680-40000

Amount of Each Disbursement this Period

326.71

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. TAXI CHARGE -DC

Mailing Address 465 UTICA AVE

City BROOKLYN State NY Zip Code 11203

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245680-50000

Amount of Each Disbursement this Period

13.49

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CREATIVE MOBILE TECHN CMT

Mailing Address 1151 47TH AVE

City LONG ISLAND C State NY Zip Code 11101-5418

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245680-90000

Amount of Each Disbursement this Period

14.82

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AMTRAK.COM

Mailing Address 60 MASSACHUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245680-10000

Amount of Each Disbursement this Period

169.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BASSO56 RESTORANTE

Mailing Address 234 W 56TH ST

City NEW YORK State NY Zip Code 10019-4302

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245680-110000

Amount of Each Disbursement this Period

111.11

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. YELLOW CAB SLSJET MANAGEM

Mailing Address 2205 43RD AVE

City LONG ISLAND C State NY Zip Code 11101-5018

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245680-120000

Amount of Each Disbursement this Period: 69.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DOUBLETREE METROPOLITAN HOTEL

Mailing Address 569 LEXINGTON

City NEW YORK State NY Zip Code 10022-7562

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245680-130000

Amount of Each Disbursement this Period: 608.68

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245680-140000

Amount of Each Disbursement this Period: 19.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2014

Transaction ID : SB21B-245680-150000

Amount of Each Disbursement this Period: 27.07

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HOTEL WILSHIRE

Mailing Address 6317 WILSHIRE

City LOS ANGELES State CA Zip Code 90048

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2014

Transaction ID : SB21B-245680-160000

Amount of Each Disbursement this Period: 1253.13

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTEL WILSHIRE

Mailing Address 6317 WILSHIRE

City LOS ANGELES State CA Zip Code 90048

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2014

Transaction ID : SB21B-245680-170000

Amount of Each Disbursement this Period: 28.34

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AMTRAK.COM

Mailing Address 60 MASSACHUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
1	2	3		4	5	6		7	8	9	0	1	2

Transaction ID : SB21B-245680-180000

Amount of Each Disbursement this Period

2	4	4	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AMTRAK.COM

Mailing Address 60 MASSACHUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
1	2	3		4	5	6		7	8	9	0	1	2

Transaction ID : SB21B-245680-190000

Amount of Each Disbursement this Period

2	4	4	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BOINGO WIRELESS

Mailing Address 10960 WILSHIR

City LOS ANGELES State CA Zip Code 90024-3711

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
1	2	3		4	5	6		7	8	9	0	1	2

Transaction ID : SB21B-245680-200000

Amount of Each Disbursement this Period

9	9	5	.	0	0
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[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0	.	0	0
---	---	---	---	---	---

0	0	0	.	0	0
---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245681

Amount of Each Disbursement this Period

898.15

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. LODGING TRANSACTION

Mailing Address 12202 AIRPORT

City BROOMFIELD State CO Zip Code 80021-2596

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245681-10000

Amount of Each Disbursement this Period

203.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FEAST

Mailing Address 3719 E SPEEDW

City TUCSON State AZ Zip Code 85716

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245681-20000

Amount of Each Disbursement this Period

42.41

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

898.15

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GALLO BLANCO

Mailing Address 401 W CLAREND

City PHOENIX State AZ Zip Code 85013

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245681-30000

Amount of Each Disbursement this Period

19.62

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SQUARE

Mailing Address ST 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245681-40000

Amount of Each Disbursement this Period

7.01

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MCDONALDS

Mailing Address 3315 N SWAN R

City TUCSON State AZ Zip Code 85712-1230

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245681-50000

Amount of Each Disbursement this Period

5.68

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CROSSROADS 216

Mailing Address 4775 E GRANT

City TUCSON State AZ Zip Code 85712-2772

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245681-60000

Amount of Each Disbursement this Period

14.59

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WALGREENS 04045

Mailing Address 4685 E GRANT

City TUCSON State AZ Zip Code 85712-2618

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245681-70000

Amount of Each Disbursement this Period

14.59

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HARVEST RESTAURANT

Mailing Address 141

City TUCSON State AZ Zip Code 85737

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245681-80000

Amount of Each Disbursement this Period

13.78

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 5691

Mailing Address **SUNRISE & SWA**

City **TUCSON** State **AZ** Zip Code **85718**

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245681-90000

Amount of Each Disbursement this Period

5.73

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 5691

Mailing Address **SUNRISE & SWA**

City **TUCSON** State **AZ** Zip Code **85718**

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245681-10000

Amount of Each Disbursement this Period

4.51

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 5529

Mailing Address **GRANT & SWAN**

City **TUCSON** State **AZ** Zip Code **85712**

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245681-110000

Amount of Each Disbursement this Period

2.11

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 5529

Mailing Address GRANT & SWAN

City TUCSON State AZ Zip Code 85712

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245681-120000

Amount of Each Disbursement this Period

3.19

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 5529

Mailing Address GRANT & SWAN

City TUCSON State AZ Zip Code 85712

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245681-130000

Amount of Each Disbursement this Period

2.16

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 5529

Mailing Address GRANT & SWAN

City TUCSON State AZ Zip Code 85712

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245681-140000

Amount of Each Disbursement this Period

3.19

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FRESH

Mailing Address 2404 E RIVER

City TUCSON State AZ Zip Code 85718-6520

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245681-150000

Amount of Each Disbursement this Period

6.41

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CITY OF TUCSON PARK WISE

Mailing Address 255 W ALAMEDA

City TUCSON State AZ Zip Code 85701-1362

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245681-160000

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. EL SAGUARITO MEXICAN FOOD

Mailing Address 1763 E PRINCE

City TUCSON State AZ Zip Code 85719

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245681-170000

Amount of Each Disbursement this Period

77.50

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DUNKIN DONUTS

Mailing Address 4676 E GRANT

City TUCSON State AZ Zip Code 85712-2624

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245681-180000

Amount of Each Disbursement this Period

1.93

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CIRCLE K # 3415

Mailing Address 3215 N SWAN R

City TUCSON State AZ Zip Code 85712-1228

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245681-190000

Amount of Each Disbursement this Period

39.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245681-200000

Amount of Each Disbursement this Period

7.32

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DAIRY QUEEN #15096

Mailing Address 501 N 4TH AVE

City TUCSON State AZ Zip Code 85705-8448

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245681-210000

Amount of Each Disbursement this Period

3.25

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245681-220000

Amount of Each Disbursement this Period

221.65

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS

Mailing Address 4676 E GRANT

City TUCSON State AZ Zip Code 85712-2624

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245681-230000

Amount of Each Disbursement this Period

27.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. BARNES & NOBLE 2892

Mailing Address 5130 E BROADW

City TUCSON State AZ Zip Code 85711-3762

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245681-240000

Amount of Each Disbursement this Period

3.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BARNES & NOBLE 2892

Mailing Address 5130 E BROADW

City TUCSON State AZ Zip Code 85711-3762

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245681-250000

Amount of Each Disbursement this Period

4.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GALLO BLANCO

Mailing Address 401 W CLAREND

City PHOENIX State AZ Zip Code 85013

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245681-260000

Amount of Each Disbursement this Period

39.49

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GALLO BLANCO

Mailing Address 401 W CLAREND

City PHOENIX State AZ Zip Code 85013

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245681-270000

Amount of Each Disbursement this Period

7.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BOWLINS PICACHO PEAK DQ

Mailing Address 16543 E CAMIN

City MESA State AZ Zip Code 85141

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245681-280000

Amount of Each Disbursement this Period

2.44

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS

Mailing Address 5346 E 22ND S

City TUCSON State AZ Zip Code 85711-5404

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245681-290000

Amount of Each Disbursement this Period

5.28

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245681-300000

Amount of Each Disbursement this Period

7.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STRBCKS TRM C 16 1226159

Mailing Address SOUTH TERMINA

City State Zip Code
ATLANTA GA 30320

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245681-310000

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STRBCKS TRM C 16 1226159

Mailing Address SOUTH TERMINA

City State Zip Code
ATLANTA GA 30320

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245681-320000

Amount of Each Disbursement this Period

2.92

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CIRCLE K 2703399

Mailing Address 1122 E INDIAN

City PHOENIX State AZ Zip Code 85014-4813

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245681-330000

Amount of Each Disbursement this Period

23.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PEET'S COFFEE S2

Mailing Address TERMINAL 4

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245681-340000

Amount of Each Disbursement this Period

7.47

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CHARLEYS GRILLED SUBS - 5

Mailing Address 10700 SPINE R

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245681-350000

Amount of Each Disbursement this Period

7.69

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. OTG DCA VENTURE II, LLC		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address RNL D RGN WA N		Transaction ID : SB21B-245681-360000
City ARLINGTON State VA Zip Code 22202	Amount of Each Disbursement this Period 9.61	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1455 MARKET S		Transaction ID : SB21B-245681-370000
City SAN FRANCISCO State CA Zip Code 94103	Amount of Each Disbursement this Period 10.41	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. LINCOLN		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1110 VERMONT		Transaction ID : SB21B-245681-380000
City WASHINGTON State DC Zip Code 20005-3544	Amount of Each Disbursement this Period 24.90	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement Deliveries

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
12			18			2014			

Transaction ID : SB21B-245683

Amount of Each Disbursement this Period

1816.57

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. UPS BILLING CENTER

Mailing Address 1620 VALWOOD

City CARROLLTON State TX Zip Code 75006-8321

Purpose of Disbursement Deliveries

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
12			18			2014			

Transaction ID : SB21B-245683-10000

Amount of Each Disbursement this Period

14.69

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UPS BILLING CENTER

Mailing Address 1620 VALWOOD

City CARROLLTON State TX Zip Code 75006-8321

Purpose of Disbursement Deliveries

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
12			18			2014			

Transaction ID : SB21B-245683-20000

Amount of Each Disbursement this Period

51.78

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1816.57

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UPS BILLING CENTER

Mailing Address 1620 VALWOOD

City CARROLLTON State TX Zip Code 75006-8321

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245683-30000

Amount of Each Disbursement this Period

369.23

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UPS BILLING CENTER

Mailing Address 1620 VALWOOD

City CARROLLTON State TX Zip Code 75006-8321

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245683-40000

Amount of Each Disbursement this Period

233.78

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UPS BILLING CENTER

Mailing Address 1620 VALWOOD

City CARROLLTON State TX Zip Code 75006-8321

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245683-50000

Amount of Each Disbursement this Period

19.72

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UPS BILLING CENTER

Mailing Address 1620 VALWOOD

City CARROLLTON State TX Zip Code 75006-8321

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245683-60000

Amount of Each Disbursement this Period

182.66

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UPS BILLING CENTER

Mailing Address 1620 VALWOOD

City CARROLLTON State TX Zip Code 75006-8321

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245683-70000

Amount of Each Disbursement this Period

560.92

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UPS BILLING CENTER

Mailing Address 1620 VALWOOD

City CARROLLTON State TX Zip Code 75006-8321

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245683-80000

Amount of Each Disbursement this Period

78.40

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UPS BILLING CENTER

Mailing Address 1620 VALWOOD

City CARROLLTON State TX Zip Code 75006-8321

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245683-90000

Amount of Each Disbursement this Period

90.59

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UPS BILLING CENTER

Mailing Address 1620 VALWOOD

City CARROLLTON State TX Zip Code 75006-8321

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245683-10000

Amount of Each Disbursement this Period

179.49

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UPS BILLING CENTER

Mailing Address 1620 VALWOOD

City CARROLLTON State TX Zip Code 75006-8321

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245683-110000

Amount of Each Disbursement this Period

95.87

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UPS BILLING CENTER

Mailing Address 1620 VALWOOD

City CARROLLTON State TX Zip Code 75006-8321

Purpose of Disbursement
Deliveries Credit

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
12			18			2014			

Transaction ID : SB21B-245683-120000

Amount of Each Disbursement this Period

-60.56

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690

Amount of Each Disbursement this Period

1369.74

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690-10000

Amount of Each Disbursement this Period

420.88

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1369.74

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CITGO OIL CO

Mailing Address 6100 S YALE A

City TULSA State OK Zip Code 74136-1922

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690-20000

Amount of Each Disbursement this Period

33.33

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS #150

Mailing Address MILE MRKR 24

City KENNEBUNKPORT State ME Zip Code 04046

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690-30000

Amount of Each Disbursement this Period

8.31

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. LEGAL SEA FOODS LOGAN 11

Mailing Address TERMINAL B

City BOSTON State MA Zip Code 02128

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690-40000

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

--

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690-50000

Amount of Each Disbursement this Period

38.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SCRAMBLERS MARIES

Mailing Address 567 E. LIVING

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690-60000

Amount of Each Disbursement this Period

42.17

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. LA CHATELAINE - WORTHINGT

Mailing Address 627 HIGH STRE

City COLUMBUS State OH Zip Code 43085

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690-70000

Amount of Each Disbursement this Period

12.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. BP FDMS INSIDE

Mailing Address 28100 TORCH P

City WARRENVILLE State IL Zip Code 60555-3938

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690-80000

Amount of Each Disbursement this Period

5.47

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690-90000

Amount of Each Disbursement this Period

210.33

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GRAETERS #32

Mailing Address 654 HIGH ST

City COLUMBUS State OH Zip Code 43085-4106

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690-100000

Amount of Each Disbursement this Period

9.84

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FIRST WATCH #61

Mailing Address 496 S HIGH ST

City State Zip Code
COLUMBUS OH 43215-5603

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245690-110000

Amount of Each Disbursement this Period

28.31

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245690-120000

Amount of Each Disbursement this Period

9.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245690-130000

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690-140000

Amount of Each Disbursement this Period

11.56

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 13978

Mailing Address 366 B BROADWA

City State Zip Code
SAUGUS MA 01906

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690-150000

Amount of Each Disbursement this Period

4.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GOGOAIR

Mailing Address 303 S TECHNOL

City State Zip Code
BROOMFIELD CO 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245690-160000

Amount of Each Disbursement this Period

4.50

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245690-170000

Amount of Each Disbursement this Period

4.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CIRCLE K #7039

Mailing Address 445 KENNEDY M

City WATERVILLE State ME Zip Code 04901-4520

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245690-180000

Amount of Each Disbursement this Period

34.83

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MASS PORT LOGAN PARKING

Mailing Address 1 HARBORSIDE

City BOSTON State MA Zip Code 02128-2905

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245690-190000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. THE VILLAGE INN

Mailing Address 920 S HIGH ST

City COLUMBUS State OH Zip Code 43206-2524

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2014

Transaction ID : SB21B-245690-200000

Amount of Each Disbursement this Period: 76.38

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AVIS RENT A CAR CORP

Mailing Address SEND ALL MAIL

City GARDEN CITY State NY Zip Code 11530

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2014

Transaction ID : SB21B-245690-210000

Amount of Each Disbursement this Period: 244.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FIVE GUYS BURGERS & FRIES

Mailing Address SPC 3 RONALD

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2014

Transaction ID : SB21B-245690-220000

Amount of Each Disbursement this Period: 10.33

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HYATT REGENCY - COLUMBUS

Mailing Address 350 N HIGH ST

City COLUMBUS State OH Zip Code 43215-2006

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245690-230000

Amount of Each Disbursement this Period

34.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
Computer Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245691

Amount of Each Disbursement this Period

52.86

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245691-10000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

52.86

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
Computer Supplies/Hardware

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
12			18			2014			

Transaction ID : SB21B-245692

Amount of Each Disbursement this Period

1173.59

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. AMAZON MARKEPLACE NA - PA

Mailing Address 440 TERRY AVE

City SEATTLE State WA Zip Code 98109-5210

Purpose of Disbursement
Computer Supplies/Hardware

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
12			18			2014			

Transaction ID : SB21B-245692-10000

Amount of Each Disbursement this Period

111.25

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RADIOSHACK 01-2483

Mailing Address 1150 CONNECTI

City WASHINGTON State DC Zip Code 20036-4104

Purpose of Disbursement
Computer Supplies/Hardware

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
12			18			2014			

Transaction ID : SB21B-245692-20000

Amount of Each Disbursement this Period

68.68

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1173.59

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TRIPIT INC.

Mailing Address 601 108TH AVE

City State Zip Code
BELLEVUE WA 98004

Purpose of Disbursement
Computer Supplies/Hardware

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
12 / 18 / 2014

Transaction ID : SB21B-245692-30000

Amount of Each Disbursement this Period

29.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WEBROOT INC

Mailing Address 385 INTERLOCK

City State Zip Code
BROOMFIELD CO 80021

Purpose of Disbursement
Computer Supplies/Hardware

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
12 / 18 / 2014

Transaction ID : SB21B-245692-40000

Amount of Each Disbursement this Period

647.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City State Zip Code
SEATTLE WA 98103-8882

Purpose of Disbursement
Computer Supplies/Hardware

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
12 / 18 / 2014

Transaction ID : SB21B-245692-50000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245692-60000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245692-70000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245692-80000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245692-90000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245692-10000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245693

Amount of Each Disbursement this Period

285.53

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

285.53

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. B2BWHL5

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Consulting Fundraising

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
12			18			2014			

Transaction ID : SB21B-245693-10000

Amount of Each Disbursement this Period

285.53

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
Office Supplies Expenses

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
12			18			2014			

Transaction ID : SB21B-245694

Amount of Each Disbursement this Period

62.77

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. WWW.STAPLES.COM 472

Mailing Address 500 STAPLES D

City FRAMINGHAM State MA Zip Code 01702-4474

Purpose of Disbursement
Office Supplies Expenses

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
12			18			2014			

Transaction ID : SB21B-245694-10000

Amount of Each Disbursement this Period

62.77

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

62.77

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement Telephone

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
12 / 18 / 2014

Transaction ID : SB21B-245695

Amount of Each Disbursement this Period

5355.64

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. NEXVORTEX INC

Mailing Address 510 SPRING ST

City HERNDON State VA Zip Code 20170-5157

Purpose of Disbursement Telephone

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
12 / 18 / 2014

Transaction ID : SB21B-245695-10000

Amount of Each Disbursement this Period

146.45

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. VZWRLSS APOCC VISB

Mailing Address TWO VERIZON P

City ALPHARETTA State GA Zip Code 30004

Purpose of Disbursement Telephone

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
12 / 18 / 2014

Transaction ID : SB21B-245695-20000

Amount of Each Disbursement this Period

1978.21

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5355.64

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VZWRLSS APOCC VISB

Mailing Address TWO VERIZON P

City ALPHARETTA State GA Zip Code 30004

Purpose of Disbursement Telephone

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
12 / 18 / 2014

Transaction ID : SB21B-245695-30000

Amount of Each Disbursement this Period

1285.61

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ATT MOB RECURRING W

Mailing Address 208 S AKARD S

City DALLAS State TX Zip Code 75202-4208

Purpose of Disbursement Telephone

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
12 / 18 / 2014

Transaction ID : SB21B-245695-40000

Amount of Each Disbursement this Period

1830.61

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NEXVORTEX INC

Mailing Address 510 SPRING ST

City HERNDON State VA Zip Code 20170-5157

Purpose of Disbursement Telephone

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
12 / 18 / 2014

Transaction ID : SB21B-245695-50000

Amount of Each Disbursement this Period

114.76

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245696

Amount of Each Disbursement this Period

33.40

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. ROLANDS CHESAPEAKE STTN

Mailing Address 7875 BAYSIDE

City CHESAPEAKE BE State MD Zip Code 20732-3104

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245696-10000

Amount of Each Disbursement this Period

33.40

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245702

Amount of Each Disbursement this Period

3958.70

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3992.10

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WHOLEFOODS MARKET PTL

Mailing Address 2 SOMERSET ST

City PORTLAND State ME Zip Code 04101-2412

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245702-40000

Amount of Each Disbursement this Period

8.44

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CITGO OIL CO

Mailing Address 6100 S YALE A

City TULSA State OK Zip Code 74136-1922

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245702-50000

Amount of Each Disbursement this Period

35.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245702-60000

Amount of Each Disbursement this Period

55.36

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

--

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245702-70000

Amount of Each Disbursement this Period

8.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WOODMANS BAR & GRILL

Mailing Address 31 MAIN ST

City ORONO State ME Zip Code 04473-4001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245702-80000

Amount of Each Disbursement this Period

24.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CITGO OIL CO

Mailing Address 6100 S YALE A

City TULSA State OK Zip Code 74136-1922

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245702-90000

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

--

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245702-10000

Amount of Each Disbursement this Period

8.46

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245702-110000

Amount of Each Disbursement this Period

169.32

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245702-120000

Amount of Each Disbursement this Period

12.80

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT TRANSACTION

Mailing Address 12202 AIRPORT

City BROOMFIELD State CO Zip Code 80021-2596

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245702-130000

Amount of Each Disbursement this Period

93.99

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS #150

Mailing Address 288 LEWISTON

City GARDINER State ME Zip Code 04345

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245702-140000

Amount of Each Disbursement this Period

12.69

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS #150

Mailing Address 288 LEWISTON

City GARDINER State ME Zip Code 04345

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245702-150000

Amount of Each Disbursement this Period

12.57

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NATIONAL CAR RENTAL TOLLS

Mailing Address 66 POWERHOUSE

City ROSLYN HEIGHT State NY Zip Code 11577

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245702-160000

Amount of Each Disbursement this Period

2	.	0	0
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245702-170000

Amount of Each Disbursement this Period

1	6	.	9	5
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AIRPORT LINK TAXI SERVIC

Mailing Address 510 AURORA AV

City SAINT PAUL State MN Zip Code 55103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245702-180000

Amount of Each Disbursement this Period

5	1	.	2	5
---	---	---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0	.	0	0
---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS B/C PHL

Mailing Address 8500 ESSINGTO

City PHILADELPHIA State PA Zip Code 19153

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245702-190000

Amount of Each Disbursement this Period

6	.	5	8
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. JAMBA JUICE

Mailing Address 8500 ESSINGTO

City PHILADELPHIA State PA Zip Code 19153

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245702-200000

Amount of Each Disbursement this Period

7	.	5	1
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DMF INTERNATIONAL INC

Mailing Address 299 GODFREY B

City BANGOR State ME Zip Code 04401-3022

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245702-210000

Amount of Each Disbursement this Period

5	.	1	8
---	---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
---	---	---	---

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NATIONAL CAR RENTAL

Mailing Address 299 GODFREY B

City BANGOR State ME Zip Code 04401-3022

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245702-220000

Amount of Each Disbursement this Period

876.85

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245702-230000

Amount of Each Disbursement this Period

14.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NATIONAL CAR RENTAL

Mailing Address 299 GODFREY B

City BANGOR State ME Zip Code 04401-3022

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245702-240000

Amount of Each Disbursement this Period

73.95

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245702-250000

Amount of Each Disbursement this Period

1798.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245702-260000

Amount of Each Disbursement this Period

55.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CREATIVE MOBILE TECHN CMT

Mailing Address 1151 47TH AVE

City LONG ISLAND C State NY Zip Code 11101-5418

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245702-270000

Amount of Each Disbursement this Period

22.61

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245702-280000

Amount of Each Disbursement this Period

18.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. NATIVE FOODS CAFE - ECOMM

Mailing Address 1150 CONNECTI

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245702-290000

Amount of Each Disbursement this Period

12.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STONEY'S LLC

Mailing Address 1433 P ST NW

City WASHINGTON State DC Zip Code 20005-1907

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245702-300000

Amount of Each Disbursement this Period

50.97

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TSUNAMI SUSHI LOUNGE

Mailing Address 1326 14TH ST

City WASHINGTON State DC Zip Code 20005-3611

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245702-310000**

Amount of Each Disbursement this Period

67.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TAYLOR GOURMET

Mailing Address 1200 19TH ST

City WASHINGTON State DC Zip Code 20036-2412

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245702-320000**

Amount of Each Disbursement this Period

13.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 7281

Mailing Address 1734 L STREET

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245702-330000**

Amount of Each Disbursement this Period

12.71

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SHAKE SHACK 18TH ST NW

Mailing Address 1216 18TH ST

City WASHINGTON State DC Zip Code 20036-2540

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245702-340000

Amount of Each Disbursement this Period

9.40

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. NATIONAL CAR RENTAL TOLLS

Mailing Address 66 POWERHOUSE

City ROSLYN HEIGHT State NY Zip Code 11577

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245702-350000

Amount of Each Disbursement this Period

4.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. TAXI CHARGE -DC

Mailing Address 465 UTICA AVE

City BROOKLYN State NY Zip Code 11203

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245702-360000

Amount of Each Disbursement this Period

15.19

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245702-370000

Amount of Each Disbursement this Period

16.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ROUGE RESTAURANT

Mailing Address 1315 16TH ST

City WASHINGTON State DC Zip Code 20036-2205

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245702-380000

Amount of Each Disbursement this Period

18.40

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RIDECHARGE INC

Mailing Address 5904 RICHMOND

City ALEXANDRIA State VA Zip Code 22303-1864

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245702-390000

Amount of Each Disbursement this Period

24.96

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HOTEL ROUGE

Mailing Address 1315 16TH ST

City WASHINGTON State DC Zip Code 20036-2205

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245702-400000**

Amount of Each Disbursement this Period: 4.40

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HOTEL ROUGE

Mailing Address 1315 16TH ST

City WASHINGTON State DC Zip Code 20036-2205

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245702-410000**

Amount of Each Disbursement this Period: 101.06

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. POTBELLY SANDWICH WORKS

Mailing Address 1900 L ST NW

City WASHINGTON State DC Zip Code 20036-5002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245702-420000**

Amount of Each Disbursement this Period: 69.21

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NATIONAL CAR RENTAL TOLLS

Mailing Address 66 POWERHOUSE

City ROSLYN HEIGHT State NY Zip Code 11577

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245702-430000

Amount of Each Disbursement this Period

0	7	5	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245702-440000

Amount of Each Disbursement this Period

1	8	9	5	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245703

Amount of Each Disbursement this Period

3	4	3	0	4	6	0	0	0	0
---	---	---	---	---	---	---	---	---	---

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3	4	3	0	4	6	0	0	0	0
---	---	---	---	---	---	---	---	---	---

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DC VIP CAB

Mailing Address 2606 BLADENSB

City WASHINGTON State DC Zip Code 20018-1423

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245703-10000

Amount of Each Disbursement this Period

9.82

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CASA LUCA

Mailing Address 1099 NEW YORK

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245703-20000

Amount of Each Disbursement this Period

85.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245703-30000

Amount of Each Disbursement this Period

205.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245703-40000

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. VTS DISTRICT CAB

Mailing Address VTS DISTRICT

City WASHINGTON State DC Zip Code 20019

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245703-50000

Amount of Each Disbursement this Period

8.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. VTS DISTRICT CAB

Mailing Address VTS DISTRICT

City WASHINGTON State DC Zip Code 20019

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245703-60000

Amount of Each Disbursement this Period

22.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245703-70000

Amount of Each Disbursement this Period

41.88

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. REPUBLIC CAFE & BISTRO

Mailing Address 1069 ELM ST

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245703-80000

Amount of Each Disbursement this Period

45.61

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245703-90000

Amount of Each Disbursement this Period

290.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. HILTON GARDEN INN F & B

Mailing Address 101 SOUTH COM

City MANCHESTER State NH Zip Code 03101-2610

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245703-10000**

Amount of Each Disbursement this Period: 22.62

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
B. RADISSON HOTEL MANCHESTER

Mailing Address 700 ELM ST

City MANCHESTER State NH Zip Code 03101-2599

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245703-110000**

Amount of Each Disbursement this Period: 33.67

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
C. HERTZ RAC FIREFLY

Mailing Address CREDIT BILLIN

City OKLAHOMA CITY State OK Zip Code 73134

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245703-120000**

Amount of Each Disbursement this Period: 256.08

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RADISSON HOTEL MANCHESTER

Mailing Address 700 ELM ST

City MANCHESTER State NH Zip Code 03101-2599

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245703-130000

Amount of Each Disbursement this Period

124.59

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MID TOWN CAFE

Mailing Address 814 ELM STREE

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245703-140000

Amount of Each Disbursement this Period

11.90

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HERTZ RAC FIREFLY

Mailing Address CREDIT BILLIN

City OKLAHOMA CITY State OK Zip Code 73134

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245703-150000

Amount of Each Disbursement this Period

126.69

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SQUARE

Mailing Address STE 600

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245703-160000

Amount of Each Disbursement this Period

24.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CREATIVE MOBILE TECHN CMT

Mailing Address 1151 47TH AVE

City State Zip Code
LONG ISLAND C NY 11101-5418

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245703-170000

Amount of Each Disbursement this Period

7.93

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245703-180000

Amount of Each Disbursement this Period

9.60

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. LOEWS MADISON HOTEL F&B

Mailing Address 1177 15TH ST

City WASHINGTON State DC Zip Code 20005-2701

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245703-190000

Amount of Each Disbursement this Period

23.90

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AMTRAK.COM

Mailing Address 60 MASSACHUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245703-200000

Amount of Each Disbursement this Period

298.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245703-210000

Amount of Each Disbursement this Period

13.68

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DAILY GRILL

Mailing Address 1200 18TH ST

City WASHINGTON State DC Zip Code 20036-2535

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245703-280000

Amount of Each Disbursement this Period

42.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. QDOBA 673

Mailing Address 1850 M ST NW

City WASHINGTON State DC Zip Code 20036-5803

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245703-290000

Amount of Each Disbursement this Period

54.45

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245703-300000

Amount of Each Disbursement this Period

18.44

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 10 GLENLAKE P

City ATLANTA State GA Zip Code 30328-3495

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245703-310000

Amount of Each Disbursement this Period

6.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245703-320000

Amount of Each Disbursement this Period

379.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RIDECHARGE INC

Mailing Address 5904 RICHMOND

City ALEXANDRIA State VA Zip Code 22303-1864

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245703-330000

Amount of Each Disbursement this Period

24.94

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AMTRAK.COM

Mailing Address 60 MASSACHUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245703-340000

Amount of Each Disbursement this Period

130.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245703-350000

Amount of Each Disbursement this Period

98.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SHERATON NY HOTEL TIMES S

Mailing Address 811 7TH AVE

City NEW YORK State NY Zip Code 10019-6002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245703-360000

Amount of Each Disbursement this Period

334.15

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RIDECHARGE INC

Mailing Address 5904 RICHMOND

City ALEXANDRIA State VA Zip Code 22303-1864

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245703-370000

Amount of Each Disbursement this Period

16.84

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AMTRAK.COM

Mailing Address 60 MASSACHUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245703-380000

Amount of Each Disbursement this Period

83.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SHERATON NY HOTEL TIMES S

Mailing Address 811 7TH AVE

City NEW YORK State NY Zip Code 10019-6002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245703-390000

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245703-400000

Amount of Each Disbursement this Period

248.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245704

Amount of Each Disbursement this Period

122.26

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. FEDEX OFFICE #1015

Mailing Address 4350 LINCOLN

City MARINA DEL RE State CA Zip Code 90292

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245704-10000

Amount of Each Disbursement this Period

41.77

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

122.26

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FEDEX OFFICE #3195

Mailing Address 467 N AZUSA A

City WEST COVINA State CA Zip Code 91791-1348

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245704-20000

Amount of Each Disbursement this Period

80.49

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245705

Amount of Each Disbursement this Period

229.82

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. FROPLAY

Mailing Address 11551 SANTA M

City LOS ANGELES State CA Zip Code 90025

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245705-10000

Amount of Each Disbursement this Period

3.22

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

229.82

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. CAHUENGA & YUCCA, HOLLYWO		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1803 N. CAHUE		Transaction ID : SB21B-245705-20000
City LOS ANGELES	State CA	
Zip Code 90028	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 7.30
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CITY OF SM PARKING METERS		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1717 4TH ST		Transaction ID : SB21B-245705-30000
City SANTA MONICA	State CA	
Zip Code 90401-3319	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 10.00
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. SQUARE		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address STE 600		Transaction ID : SB21B-245705-40000
City SAN FRANCISCO	State CA	
Zip Code 94103	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 3.50
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TRADER JOE'S #215

Mailing Address 11755 W OLYMP

City LOS ANGELES State CA Zip Code 90064-1211

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245705-50000

Amount of Each Disbursement this Period

37.18

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PHILLIPS 66-CONOCO-76 CAT

Mailing Address 411 S KEELER

City BARTLESVILLE State OK Zip Code 74004

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245705-60000

Amount of Each Disbursement this Period

42.21

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NATIVE FOODS - SANTA MONI

Mailing Address 2901 OCEAN PA

City SANTA MONICA State CA Zip Code 90405

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245705-70000

Amount of Each Disbursement this Period

12.81

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 5738

Mailing Address SANTA MONICA

City LOS ANGELES State CA Zip Code 90025

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245705-80000

Amount of Each Disbursement this Period

15.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PHILLIPS 66-CONOCO-76 CAT

Mailing Address 411 S KEELER

City BARTLESVILLE State OK Zip Code 74004

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245705-90000

Amount of Each Disbursement this Period

41.44

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 5738

Mailing Address SANTA MONICA

City LOS ANGELES State CA Zip Code 90025

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245705-100000

Amount of Each Disbursement this Period

13.50

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. T3 BURGER KING 3257201		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 201 WORLD WAY		Transaction ID : SB21B-245705-110000
City LOS ANGELES	State CA	
Zip Code 90045-5807	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 16.98
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TAXI CHARGE -DC		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 465 UTICA AVE		Transaction ID : SB21B-245705-120000
City BROOKLYN	State NY	
Zip Code 11203	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 16.86
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BOJANGLES		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 5501 JOSH BIR		Transaction ID : SB21B-245705-130000
City CHARLOTTE	State NC	
Zip Code 28208-5750	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 8.87
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245706

Amount of Each Disbursement this Period

4242.44

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. PANERA BREAD 601350

Mailing Address 400 WEST MARK

City LOUISVILLE State KY Zip Code 40202

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245706-10000

Amount of Each Disbursement this Period

48.13

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MOLLY MALONES ST MATTHEWS

Mailing Address 3900 SHELBYVI

City LOUISVILLE State KY Zip Code 40207-3133

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245706-20000

Amount of Each Disbursement this Period

163.59

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4242.44

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 10509

Mailing Address DIXIE HWY & K

City LOUISVILLE State KY Zip Code 40258

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-30000

Amount of Each Disbursement this Period

10.83

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. INSIDE SALES

Mailing Address 539 S MAIN ST

City FINDLAY State OH Zip Code 45840-3229

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-40000

Amount of Each Disbursement this Period

48.29

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PF CHANGS 9975

Mailing Address 9120 SHELBYVI

City LOUISVILLE State KY Zip Code 40222-5110

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-50000

Amount of Each Disbursement this Period

95.08

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TARGET T1479

Mailing Address 3600 MALL RD

City LOUISVILLE State KY Zip Code 40218-2272

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245706-60000

Amount of Each Disbursement this Period

4.19

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RETAIL

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245706-70000

Amount of Each Disbursement this Period

4.43

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 2541

Mailing Address HURSTBOURNE &

City LOUISVILLE State KY Zip Code 40222

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245706-80000

Amount of Each Disbursement this Period

12.35

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 2541

Mailing Address HURSTBOURNE &

City LOUISVILLE State KY Zip Code 40222

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245706-90000

Amount of Each Disbursement this Period

17.56

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PF CHANGS 9975

Mailing Address 9120 SHELBYVI

City LOUISVILLE State KY Zip Code 40222-5110

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245706-10000

Amount of Each Disbursement this Period

50.32

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOMEWOOD SUITES

Mailing Address 9401 HURSTBOU

City LOUISVILLE State KY Zip Code 40222-5233

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245706-110000

Amount of Each Disbursement this Period

2042.68

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ERMIN'S FRENCH BAKERY

Mailing Address 1201 S 1ST ST

City LOUISVILLE State KY Zip Code 40203-2805

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245706-120000

Amount of Each Disbursement this Period

6	.	7	5
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SPEEDWAY

Mailing Address 500 SPEEDWAY

City ENON State OH Zip Code 45323-1056

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245706-130000

Amount of Each Disbursement this Period

1	.	3	7
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ERMIN'S FRENCH BAKERY

Mailing Address 1201 S 1ST ST

City LOUISVILLE State KY Zip Code 40203-2805

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245706-140000

Amount of Each Disbursement this Period

1	6	.	7	5
---	---	---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SPEEDWAY

Mailing Address 500 SPEEDWAY

City ENON State OH Zip Code 45323-1056

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-150000

Amount of Each Disbursement this Period

34.74

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. LIQUOR DEPOT

Mailing Address 4048 DIXIE HW

City LOUISVILLE State KY Zip Code 40216-3808

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-160000

Amount of Each Disbursement this Period

4.01

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CVS/PHARMACY #06203

Mailing Address 3997 7TH STRE

City LOUISVILLE State KY Zip Code 40216-4103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-170000

Amount of Each Disbursement this Period

18.41

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. THE PUB LEXINGTON

Mailing Address PLAZA FAYETT

City LEXINGTON State KY Zip Code 40503-4434

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245706-180000

Amount of Each Disbursement this Period

64.13

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245706-190000

Amount of Each Disbursement this Period

14.84

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PANERA BREAD 825

Mailing Address 2573 RICHMOND

City LEXINGTON State KY Zip Code 40509-1522

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245706-200000

Amount of Each Disbursement this Period

4.85

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. STARBUCKS 001233150		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 10 STANDIFORD		Transaction ID : SB21B-245706-210000
City LOUISVILLE	State KY	
Zip Code 40209	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 4.56
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. NATIONAL CAR RENTAL		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 600 TERMINAL		Transaction ID : SB21B-245706-220000
City LOUISVILLE	State KY	
Zip Code 40209	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 678.75
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GOGOAIR		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 303 S TECHNOL		Transaction ID : SB21B-245706-230000
City BROOMFIELD	State CO	
Zip Code 80021-3411	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 4.50
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SQUARE

Mailing Address STE 600

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-240000

Amount of Each Disbursement this Period

20.25

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DOUBLETREE GUEST SUITES LEXING

Mailing Address 2601 RICHMOND

City State Zip Code
LEXINGTON KY 40509-1709

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-250000

Amount of Each Disbursement this Period

157.65

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GOGOAIR

Mailing Address 303 S TECHNOL

City State Zip Code
BROOMFIELD CO 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-260000

Amount of Each Disbursement this Period

11.95

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. CARIBOU COFFEE 123		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address LINDBERG TERM		Transaction ID : SB21B-245706-270000
City SAINT PAUL State MN Zip Code 55111	Amount of Each Disbursement this Period 2.12	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. THE HAPPY GNOME		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 498 SELBY AVE		Transaction ID : SB21B-245706-280000
City SAINT PAUL State MN Zip Code 55102-1727	Amount of Each Disbursement this Period 100.58	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. RESTAURANT		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 90 NASSAU ST		Transaction ID : SB21B-245706-290000
City PRINCETON State NJ Zip Code 08542-4529	Amount of Each Disbursement this Period 68.80	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. MINNEAPOLIS ST. PAUL AIR		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1 INTERNATION		Transaction ID : SB21B-245706-300000
City PHILADELPHIA	State PA	
Zip Code 19113-1510	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 2.68
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DAVANNI'S COFFEE 51		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 53 S CLEVELAN		Transaction ID : SB21B-245706-310000
City SAINT PAUL	State MN	
Zip Code 55105	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 8.36
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. LOUSIANA CAFE		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 613 SELBY AVE		Transaction ID : SB21B-245706-320000
City SAINT PAUL	State MN	
Zip Code 55102-1730	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 12.36
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NATIONAL CAR RENTAL

Mailing Address MINNEAPLS ST

City SAINT PAUL State MN Zip Code 55116

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245706-330000

Amount of Each Disbursement this Period

72.82

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245706-340000

Amount of Each Disbursement this Period

14.11

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. A PIECE OF CAKE AND BON V

Mailing Address 485 SELBY AVE

City SAINT PAUL State MN Zip Code 55102-1726

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245706-350000

Amount of Each Disbursement this Period

4.50

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. A PIECE OF CAKE AND BON V

Mailing Address 485 SELBY AVE

City SAINT PAUL State MN Zip Code 55102-1726

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-360000

Amount of Each Disbursement this Period

29.84

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CARIBOU COFFEE 1174

Mailing Address 4300 GLUMACK

City SAINT PAUL State MN Zip Code 55111-3010

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-370000

Amount of Each Disbursement this Period

4.54

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-380000

Amount of Each Disbursement this Period

11.95

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SQUARE

Mailing Address STE 600

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-390000

Amount of Each Disbursement this Period

19.72

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. EMBASSY SUITES

Mailing Address 10075 TENT ST

City State Zip Code
SAINT PAUL MN 55101

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-400000

Amount of Each Disbursement this Period

339.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GOGOAIR

Mailing Address 303 S TECHNOL

City State Zip Code
BROOMFIELD CO 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245706-410000

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245706-420000

Amount of Each Disbursement this Period

4.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Computer Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245707

Amount of Each Disbursement this Period

52.86

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. ADOBE WEBSALES

Mailing Address 801 N 34TH ST

City SEATTLE State WA Zip Code 98103-8882

Purpose of Disbursement
Computer Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245707-10000

Amount of Each Disbursement this Period

52.86

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

52.86

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245708

Amount of Each Disbursement this Period

18.30

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. DC VIP CAB

Mailing Address 2606 BLADENSB

City WASHINGTON State DC Zip Code 20018-1423

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245708-10000

Amount of Each Disbursement this Period

18.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245709

Amount of Each Disbursement this Period

3563.24

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3581.54

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245709-10000

Amount of Each Disbursement this Period

23.08

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HY-VEE FOODS 1148

Mailing Address 4707 FLEUR DR

City DES MOINES State IA Zip Code 50321-2335

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245709-20000

Amount of Each Disbursement this Period

47.48

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. E STARBUCKS #156

Mailing Address 5501 JOSH BIR

City CHARLOTTE State NC Zip Code 28208-5750

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245709-30000

Amount of Each Disbursement this Period

2.38

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SMOKEY ROW - DSM

Mailing Address 1910 COTTAGE

City DES MOINES State IA Zip Code 50314-1123

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-40000

Amount of Each Disbursement this Period

3.02

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SMOKEY ROW - DSM

Mailing Address 1910 COTTAGE

City DES MOINES State IA Zip Code 50314-1123

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-50000

Amount of Each Disbursement this Period

2.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PANERA BREAD #3205

Mailing Address 4150 WESTOWN

City WEST DES MOIN State IA Zip Code 50266-5901

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-60000

Amount of Each Disbursement this Period

10.27

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SMOKEY ROW - DSM

Mailing Address 1910 COTTAGE

City DES MOINES State IA Zip Code 50314-1123

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245709-70000

Amount of Each Disbursement this Period

2.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. QUIKTRIP 534

Mailing Address 2945 E UNIVER

City DES MOINES State IA Zip Code 50317-8235

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245709-80000

Amount of Each Disbursement this Period

1.26

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. QUIKTRIP 500

Mailing Address 3700 HUBBELL

City DES MOINES State IA Zip Code 50317-4345

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245709-90000

Amount of Each Disbursement this Period

1.49

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SMOKEY ROW - DSM

Mailing Address 1910 COTTAGE

City DES MOINES State IA Zip Code 50314-1123

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-10000

Amount of Each Disbursement this Period

2	.	7	5
2	.	7	5

2.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT TRANSACTION

Mailing Address 600 MORGAN FA

City ATLANTA State GA Zip Code 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-110000

Amount of Each Disbursement this Period

1	1	.	3	0
1	1	.	3	0

11.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NOODLES & CO 537

Mailing Address 2105 INGERSOL

City DES MOINES State IA Zip Code 50312-5201

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-120000

Amount of Each Disbursement this Period

8	.	8	8
8	.	8	8

8.88

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
0	.	0	0

0.00

0	.	0	0
0	.	0	0

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SMOKEY ROW - DSM

Mailing Address 1910 COTTAGE

City DES MOINES State IA Zip Code 50314-1123

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-130000

Amount of Each Disbursement this Period

4.82

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. QUIKTRIP 530

Mailing Address 2300 E 14TH S

City DES MOINES State IA Zip Code 50316-1902

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-140000

Amount of Each Disbursement this Period

1.53

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DAHLS FUEL-INGRSOLL FUEL

Mailing Address 3401 INGERSOLL

City DES MOINES State IA Zip Code 50312-3915

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-150000

Amount of Each Disbursement this Period

2.73

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. PALMERS DELI INGERSOLL		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 2843 INGERSOL		Transaction ID : SB21B-245709-160000
City DES MOINES	State IA	
Zip Code 50312	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 6.97
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. QUIKTRIP 559 CAT		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 5701 FLEUR DR		Transaction ID : SB21B-245709-170000
City DES MOINES	State IA	
Zip Code 50321-2843	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 37.90
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. NATIONAL RENT-A-CAR		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 5800 FLEUR DR		Transaction ID : SB21B-245709-180000
City DES MOINES	State IA	
Zip Code 50321-2869	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 331.56
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. QUIKTRIP 559

Mailing Address 5701 FLEUR DR

City DES MOINES State IA Zip Code 50321-2843

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245709-190000

Amount of Each Disbursement this Period

1.79

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESIDENCE INN DES MOINES

Mailing Address 100 WATER ST

City DES MOINES State IA Zip Code 50309

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245709-200000

Amount of Each Disbursement this Period

1561.39

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DSM FRIEDRICH'S COFFEE

Mailing Address 6121 EXCELSIO

City MINNEAPOLIS State MN Zip Code 55416-2725

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245709-210000

Amount of Each Disbursement this Period

2.12

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. CHARLOTTE AVIATION/PARKIN		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 600 E 4TH ST		Transaction ID : SB21B-245709-220000
City CHARLOTTE	State NC	
Zip Code 28202-2816	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 89.00
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PAPA JOHNS/SALSARITAS/EIN		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 2028 CROSS BE		Transaction ID : SB21B-245709-230000
City CHARLOTTE	State NC	
Zip Code 28217-2855	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 2.80
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. SQUARE		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address STE 600		Transaction ID : SB21B-245709-240000
City SAN FRANCISCO	State CA	
Zip Code 94103	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 21.19
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RIDECHARGE INC

Mailing Address 5904 RICHMOND

City ALEXANDRIA State VA Zip Code 22303-1864

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245709-250000

Amount of Each Disbursement this Period

15.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GRAND CAB

Mailing Address GRAND CAB

City WASHINGTON State DC Zip Code 20018

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245709-260000

Amount of Each Disbursement this Period

18.08

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SUBWAY 12567-0

Mailing Address 1129 18TH ST

City WASHINGTON State DC Zip Code 20036-3802

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245709-270000

Amount of Each Disbursement this Period

6.60

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TEDS' BULLETIN

Mailing Address 505 8TH ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245709-280000

Amount of Each Disbursement this Period

27.21

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CREATIVE MOBILE TECHN CMT

Mailing Address 1151 47TH AVE

City LONG ISLAND C State NY Zip Code 11101-5418

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245709-290000

Amount of Each Disbursement this Period

16.22

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CREATIVE MOBILE TECHN CMT

Mailing Address 1151 47TH AVE

City LONG ISLAND C State NY Zip Code 11101-5418

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245709-300000

Amount of Each Disbursement this Period

7.66

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DC VIP CAB

Mailing Address 2606 BLADENSB

City WASHINGTON State DC Zip Code 20018-1423

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-310000

Amount of Each Disbursement this Period

20.73

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. LAS PLACITAS RESTAURANT

Mailing Address 517 8TH ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-320000

Amount of Each Disbursement this Period

18.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HYATT REGENCY WASHINGTON

Mailing Address 400 NEW JERSE

City WASHINGTON State DC Zip Code 20001-2002

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-330000

Amount of Each Disbursement this Period

5.95

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-340000

Amount of Each Disbursement this Period

14.24

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DC VIP CAB

Mailing Address 2606 BLADENSB

City WASHINGTON State DC Zip Code 20018-1423

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-350000

Amount of Each Disbursement this Period

17.84

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RIDECHARGE INC

Mailing Address 5904 RICHMOND

City ALEXANDRIA State VA Zip Code 22303-1864

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245709-360000

Amount of Each Disbursement this Period

16.19

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AU BON PAIN CAFE#127

Mailing Address 1724 L ST NW

City WASHINGTON State DC Zip Code 20036-5406

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245709-370000

Amount of Each Disbursement this Period

1.97

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PIEDMONT TRIAD AIRPORT

Mailing Address 1000A TED JOH

City GREENSBORO State NC Zip Code 27409-9222

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245709-380000

Amount of Each Disbursement this Period

33.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RENAISSANCE HTLS & RESRTS

Mailing Address 1127 CONNECTI

City WASHINGTON State DC Zip Code 20036-4301

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245709-390000

Amount of Each Disbursement this Period

1161.53

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City American Express State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245710

Amount of Each Disbursement this Period

3.52

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. BARRIQUES - MIDDLETON

Mailing Address 1901 CAYUGA S

City MIDDLETON State WI Zip Code 53562-5404

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245710-10000

Amount of Each Disbursement this Period

3.52

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City American Express State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245711

Amount of Each Disbursement this Period

148.46

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

151.98

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245711-10000

Amount of Each Disbursement this Period

148.46

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City American Express State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245712

Amount of Each Disbursement this Period

371.30

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS 302949

Mailing Address 1022 S WILLOW

City MANCHESTER State NH Zip Code 03103-4020

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245712-10000

Amount of Each Disbursement this Period

2.17

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

371.30

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TACO BELL #029271

Mailing Address 1045 S WILLOW

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245712-20000

Amount of Each Disbursement this Period

7	.	5	1
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245712-30000

Amount of Each Disbursement this Period

8	.	1	8
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS 302949

Mailing Address 1022 S WILLOW

City MANCHESTER State NH Zip Code 03103-4020

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245712-40000

Amount of Each Disbursement this Period

2	.	2	8
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[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
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0	.	0	0
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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. DUNKIN DONUTS 302949		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1022 S WILLOW		Transaction ID : SB21B-245712-50000
City MANCHESTER	State NH	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 29.57
Candidate Name		[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. DUNKIN DONUTS 302949		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1022 S WILLOW		Transaction ID : SB21B-245712-60000
City MANCHESTER	State NH	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 2.17
Candidate Name		[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. RESTAURANT TRANSACTION		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 600 MORGAN FA		Transaction ID : SB21B-245712-70000
City ATLANTA	State GA	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 9.27
Candidate Name		[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DUNKIN DONUTS 300591

Mailing Address 216 ELM ST

City MANCHESTER State NH Zip Code 03101-2716

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245712-80000

Amount of Each Disbursement this Period

2.17

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TACO BELL #029271

Mailing Address 1045 S WILLOW

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245712-90000

Amount of Each Disbursement this Period

6.97

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT TRANSACTION

Mailing Address 600 MORGAN FA

City ATLANTA State GA Zip Code 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245712-100000

Amount of Each Disbursement this Period

9.27

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CHIPOTLE 1473

Mailing Address 926 S WILLOW

City MANCHESTER State NH Zip Code 03103-4020

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 18 / 2014

Transaction ID : **SB21B-245712-110000**

Amount of Each Disbursement this Period: 7.42

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MANCHESTER CTY CITATION

Mailing Address 1 CITY HALL P

City MANCHESTER State NH Zip Code 03101-2025

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 18 / 2014

Transaction ID : **SB21B-245712-120000**

Amount of Each Disbursement this Period: 10.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS COFFEE

Mailing Address 2401 UTAH AVE

City SEATTLE State WA Zip Code 98134-1435

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 18 / 2014

Transaction ID : **SB21B-245712-130000**

Amount of Each Disbursement this Period: 20.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SUN REFINING & MARKETTING

Mailing Address PO BOX 2301

City State Zip Code
TULSA OK 74102-2301

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	18	/	2014

Transaction ID : SB21B-245712-140000

Amount of Each Disbursement this Period

30.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TEXAS RDHS HOLDING 2158

Mailing Address 580 AMHERST S

City State Zip Code
NASHUA NH 03063-1002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	18	/	2014

Transaction ID : SB21B-245712-150000

Amount of Each Disbursement this Period

35.37

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MOLLYS BALLOON

Mailing Address 43 S MAIN ST

City State Zip Code
HANOVER NH 03755-2047

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	18	/	2014

Transaction ID : SB21B-245712-160000

Amount of Each Disbursement this Period

17.72

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MCDONALD'S #12518

Mailing Address 3 COTTON RD

City NASHUA State NH Zip Code 03063

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245712-170000

Amount of Each Disbursement this Period

4.89

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SUN REFINING & MARKETTING

Mailing Address PO BOX 2301

City TULSA State OK Zip Code 74102-2301

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245712-180000

Amount of Each Disbursement this Period

27.22

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS 302949

Mailing Address 1022 S WILLOW

City MANCHESTER State NH Zip Code 03103-4020

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245712-190000

Amount of Each Disbursement this Period

2.17

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TACO BELL #029271

Mailing Address 1045 S WILLOW

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245712-200000

Amount of Each Disbursement this Period

6.97

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT TRANSACTION

Mailing Address 600 MORGAN FA

City ATLANTA State GA Zip Code 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245712-210000

Amount of Each Disbursement this Period

9.27

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS PC 340187

Mailing Address NORTH MAIN ST

City ASHLAND State NH Zip Code 03217

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245712-220000

Amount of Each Disbursement this Period

2.41

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SUBWAY 23222-0

Mailing Address 88 WASHINGTON

City CLAREMONT State NH Zip Code 03743

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245712-260000

Amount of Each Disbursement this Period

7.36

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MCDONALDS 1859

Mailing Address ROUTE 12A, SO

City WEST LEBANON State NH Zip Code 03784

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245712-270000

Amount of Each Disbursement this Period

1.85

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS CLA

Mailing Address 202 WASHINGTO

City CLAREMONT State NH Zip Code 03743-5510

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245712-280000

Amount of Each Disbursement this Period

1.08

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. KFC W LEBANON

Mailing Address 197 S MAIN ST

City WEST LEBANON State NH Zip Code 03784

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245712-290000

Amount of Each Disbursement this Period

3.68

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245712-300000

Amount of Each Disbursement this Period

13.33

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. TACO BELL #029271

Mailing Address 1045 S WILLOW

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245712-310000

Amount of Each Disbursement this Period

8.06

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. OTH/MISC

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245712-320000

Amount of Each Disbursement this Period

17.88

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MCDONALD'S 0596

Mailing Address 196 S WILLOW

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245712-330000

Amount of Each Disbursement this Period

5.54

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. QUIZNOS MHT 001041470

Mailing Address 1 AIRPORT RD

City MANCHESTER State NH Zip Code 03103-7450

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245712-340000

Amount of Each Disbursement this Period

11.28

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GO VEGETARIAN RESTAURANT

Mailing Address 2179 LAWRENCE

City State Zip Code
DECATUR GA 30033

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245713-20000

Amount of Each Disbursement this Period

10.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PUBLIX 665

Mailing Address 3870 N DRUID

City State Zip Code
DECATUR GA 30033-3002

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245713-30000

Amount of Each Disbursement this Period

13.94

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GO VEGETARIAN RESTAURANT

Mailing Address 2179 LAWRENCE

City State Zip Code
DECATUR GA 30033

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245713-40000

Amount of Each Disbursement this Period

12.15

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245713-50000

Amount of Each Disbursement this Period

66.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PUBLIX 665

Mailing Address 3870 N DRUID

City DECATUR State GA Zip Code 30033-3002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245713-60000

Amount of Each Disbursement this Period

6.85

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CHICK-FIL-A 00485

Mailing Address 3905 N DRUID

City DECATUR State GA Zip Code 30033-3104

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245713-70000

Amount of Each Disbursement this Period

6.20

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GO VEGETARIAN RESTAURANT

Mailing Address 2179 LAWRENCE

City State Zip Code
DECATUR GA 30033

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245713-80000

Amount of Each Disbursement this Period

8.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HEALTHCARE TRANSACTION

Mailing Address 600 MORGAN FA

City State Zip Code
ATLANTA GA 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245713-90000

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WALGREENS 07167

Mailing Address 5511A CHAMBLE

City State Zip Code
ATLANTA GA 30338-4106

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245713-100000

Amount of Each Disbursement this Period

14.39

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245713-110000

Amount of Each Disbursement this Period

9	.	6	1
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 987

Mailing Address DUNWOODY VILL

City ATLANTA State GA Zip Code 30338

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245713-120000

Amount of Each Disbursement this Period

3	.	6	9
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SHELL OIL

Mailing Address 12700 NORTHBO

City HOUSTON State TX Zip Code 77067-2552

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245713-130000

Amount of Each Disbursement this Period

1	9	.	0	1
---	---	---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
---	---	---	---

0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245713-140000

Amount of Each Disbursement this Period

519.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CHICK-FIL-A 00485

Mailing Address 3905 N DRUID

City DECATUR State GA Zip Code 30033-3104

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245713-150000

Amount of Each Disbursement this Period

4.96

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 8243

Mailing Address NORTH LAKE

City TUCKER State GA Zip Code 30084

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245713-160000

Amount of Each Disbursement this Period

17.82

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GO VEGETARIAN RESTAURANT

Mailing Address 2179 LAWRENCE

City State Zip Code
DECATUR GA 30033

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245713-170000

Amount of Each Disbursement this Period

8.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. NTH HRLY EXP.LNE45 99337

Mailing Address 6000 N TERMIN

City State Zip Code
ATLANTA GA 30320-7400

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245713-180000

Amount of Each Disbursement this Period

2.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PUBLIX 665

Mailing Address 3870 N DRUID

City State Zip Code
DECATUR GA 30033-3002

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245713-190000

Amount of Each Disbursement this Period

8.54

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CHICK-FIL-A 00485

Mailing Address 3905 N DRUID

City DECATUR State GA Zip Code 30033-3104

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245713-200000

Amount of Each Disbursement this Period

6.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WENDY'S

Mailing Address 2050 LAWRENCE

City DECATUR State GA Zip Code 30033-4323

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245713-210000

Amount of Each Disbursement this Period

7.78

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245713-220000

Amount of Each Disbursement this Period

580.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WALMART SUPERCENTER

Mailing Address 702 SW 8TH ST

City BENTONVILLE State AR Zip Code 72716-6299

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245713-230000

Amount of Each Disbursement this Period

10.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BP FDMS CAT

Mailing Address 28100 TORCH P

City WARRENVILLE State IL Zip Code 60555-3938

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245713-240000

Amount of Each Disbursement this Period

24.90

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HILTON GARDEN INN PANAMA

Mailing Address ATTN: GENERAL

City PANAMA CITY State FL Zip Code 32405-5306

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245713-250000

Amount of Each Disbursement this Period

179.34

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CORNER BAKERY CAFE 1570

Mailing Address 7700 SPINE RD

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245713-290000

Amount of Each Disbursement this Period

11.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ALAMO RENT A CAR ATLT71

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245713-300000

Amount of Each Disbursement this Period

338.51

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245713-310000

Amount of Each Disbursement this Period

206.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES E TKT		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address AMERICAN AIRL		Transaction ID : SB21B-245713-320000
City TULSA	State OK	
Zip Code 74133	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 281.10
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. HILTON GARDEN INN		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1330 BLAIRSTO		Transaction ID : SB21B-245713-330000
City TALLAHASSEE	State FL	
Zip Code 32301-3068	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 156.38
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. HILTON HOTEL		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 255 COURTLAND		Transaction ID : SB21B-245713-340000
City ATLANTA	State GA	
Zip Code 30303-1265	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 667.50
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DELTA AIR LINES

Mailing Address DEPT 680 1030

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245713-350000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HILTON GARDEN INN

Mailing Address 250 HASKELL R

City BANGOR State ME Zip Code 04401-4241

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245713-360000

Amount of Each Disbursement this Period

1973.74

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245713-370000

Amount of Each Disbursement this Period

653.20

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245713-380000

Amount of Each Disbursement this Period

356.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245713-390000

Amount of Each Disbursement this Period

184.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STAPLES 1532

Mailing Address 1901 L ST NW

City WASHINGTON State DC Zip Code 20036-3509

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245713-400000

Amount of Each Disbursement this Period

8.45

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STAPLES 1532

Mailing Address 1901 L ST NW

City WASHINGTON State DC Zip Code 20036-3509

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245713-410000

Amount of Each Disbursement this Period

2.69

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245714

Amount of Each Disbursement this Period

1909.83

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. DELIWORKS & PIZZERIA

Mailing Address 62 MONTVALE A

City STONEHAM State MA Zip Code 02180-3633

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245714-10000

Amount of Each Disbursement this Period

22.01

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1909.83

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NATURAL GROCERY

Mailing Address 507 MEDFORD S

City SOMERVILLE State MA Zip Code 02145

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245714-20000

Amount of Each Disbursement this Period

4	.	2	8
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS 306272

Mailing Address 283 MIDDLESEX

City MEDFORD State MA Zip Code 02155-5056

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245714-30000

Amount of Each Disbursement this Period

2	.	2	4
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WENDY'S 10554

Mailing Address WASHINGTON ST

City WOBURN State MA Zip Code 01801

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245714-40000

Amount of Each Disbursement this Period

7	.	5	9
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[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
---	---	---	---

0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT TRANSACTION

Mailing Address 600 MORGAN FA

City ATLANTA State GA Zip Code 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245714-50000

Amount of Each Disbursement this Period

9.27

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS 302678

Mailing Address 344 WASHINGTO

City WOBURN State MA Zip Code 01801-2117

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245714-60000

Amount of Each Disbursement this Period

2.19

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HILTON/BOSTON WOBURN

Mailing Address 2 FORBES RD

City WOBURN State MA Zip Code 01801-2103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245714-70000

Amount of Each Disbursement this Period

713.19

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SWA INFLIGHT WIFI

Mailing Address 4353 PARK TER

City WESTLAKE VILL State CA Zip Code 91361-4631

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245714-110000

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BANTUM & BIDDY

Mailing Address SUITE 6

City ATLANTA State GA Zip Code 30309

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245714-120000

Amount of Each Disbursement this Period

60.42

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GULF OIL BUILDING

Mailing Address 100 CROSSING

City FRAMINGHAM State MA Zip Code 01702-5401

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245714-130000

Amount of Each Disbursement this Period

18.26

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HILTON GARDEN INN

Mailing Address 101 SOUTH COM

City MANCHESTER State NH Zip Code 03101-2610

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245714-140000

Amount of Each Disbursement this Period

151.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. JASON'S DELI - ATM #113

Mailing Address 230 10TH ST N

City ATLANTA State GA Zip Code 30309-3707

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245714-150000

Amount of Each Disbursement this Period

11.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ENTERPRISE RENT A CAR TOL

Mailing Address 66 POWERHOUSE

City ROSLYN HEIGHT State NY Zip Code 11577-1372

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245714-160000

Amount of Each Disbursement this Period

7.95

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 982

Mailing Address PEACHTREE BAT

City ATLANTA State GA Zip Code 30305

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245714-170000

Amount of Each Disbursement this Period

5.24

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. POOR CALVINS

Mailing Address 510 PIEDMONT

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245714-180000

Amount of Each Disbursement this Period

50.81

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SHELL OIL

Mailing Address 12700 NORTHBO

City HOUSTON State TX Zip Code 77067-2552

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245714-190000

Amount of Each Disbursement this Period

4.31

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TRADER JOES 730

Mailing Address 931 MONROE DR

City ATLANTA State GA Zip Code 30308-1796

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245714-200000

Amount of Each Disbursement this Period

18.46

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BATDORF & BRONSON DANCING

Mailing Address 694 GLEN IRIS

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245714-210000

Amount of Each Disbursement this Period

9.64

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WHOLE FOODS MARKETPNC

Mailing Address 650 PONCE DE

City ATLANTA State GA Zip Code 30308-1864

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245714-220000

Amount of Each Disbursement this Period

15.64

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. SHELL OIL

Mailing Address ATTN: TEXACO

City HOUSTON State TX Zip Code 77067

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245714-260000

Amount of Each Disbursement this Period

21.18

[MEMO ITEM]
Memo Entry

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245714-270000

Amount of Each Disbursement this Period

209.00

[MEMO ITEM]
Memo Entry

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245714-280000

Amount of Each Disbursement this Period

21.21

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. BATDORF & BRONSON DANCING

Mailing Address 694 GLEN IRIS

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245714-290000

Amount of Each Disbursement this Period

6.59

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ENTERPRISE RENT A CAR

Mailing Address ATLANTA ARPRT

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245714-300000

Amount of Each Disbursement this Period

201.93

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MARY MACS TEA ROOM

Mailing Address 224 PONCE DE

City ATLANTA State GA Zip Code 30308-1938

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245714-310000

Amount of Each Disbursement this Period

26.84

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ENTERPRISE RENT A CAR TOL

Mailing Address 66 POWERHOUSE

City ROSLYN HEIGHT State NY Zip Code 11577-1372

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2014

Transaction ID : SB21B-245714-320000

Amount of Each Disbursement this Period: 3.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RIDECHARGE INC

Mailing Address 5904 RICHMOND

City ALEXANDRIA State VA Zip Code 22303-1864

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2014

Transaction ID : SB21B-245714-330000

Amount of Each Disbursement this Period: 15.82

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STAPLES 1532

Mailing Address 1901 L ST NW

City WASHINGTON State DC Zip Code 20036-3509

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2014

Transaction ID : SB21B-245714-340000

Amount of Each Disbursement this Period: 12.52

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336

Purpose of Disbursement
Office Supplies Expenses

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
12			18			2014			

Transaction ID : SB21B-245715

Amount of Each Disbursement this Period

32.10

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. FEDEX OFFICE #1519

Mailing Address 2316 HILLSBOR

City State Zip Code
RALEIGH NC 27607-7384

Purpose of Disbursement
Office Supplies Expenses

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
12			18			2014			

Transaction ID : SB21B-245715-10000

Amount of Each Disbursement this Period

6.37

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FEDEX OFFICE #1519

Mailing Address 2316 HILLSBOR

City State Zip Code
RALEIGH NC 27607-7384

Purpose of Disbursement
Office Supplies Expenses

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
12			18			2014			

Transaction ID : SB21B-245715-20000

Amount of Each Disbursement this Period

1.28

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

32.10

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FEDEX OFFICE #1547

Mailing Address 6820 GLENWOOD

City RALEIGH State NC Zip Code 27612-7133

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245715-30000

Amount of Each Disbursement this Period

24.45

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245716

Amount of Each Disbursement this Period

4796.25

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. ZOE'S KITCHEN NORTH HILLS

Mailing Address 141-112 PARK

City RALEIGH State NC Zip Code 27609

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245716-10000

Amount of Each Disbursement this Period

17.63

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4796.25

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SAXBYS COFFEE - RALEIGH -

Mailing Address 141-111 PARK

City RALEIGH State NC Zip Code 27607

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-20000

Amount of Each Disbursement this Period

3.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. JOULE COFFEE

Mailing Address 2800 BEDFORD

City RALEIGH State NC Zip Code 27607

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-30000

Amount of Each Disbursement this Period

10.35

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-40000

Amount of Each Disbursement this Period

12.82

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-50000

Amount of Each Disbursement this Period

317.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 8459

Mailing Address NORTH HILLS P

City RALEIGH State NC Zip Code 27609

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-60000

Amount of Each Disbursement this Period

5.82

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-70000

Amount of Each Disbursement this Period

243.12

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ALASKA AIRLINES

Mailing Address 20833 INTERNA

City SEATTLE State WA Zip Code 98198-5950

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245716-80000

Amount of Each Disbursement this Period

244.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PDQ

Mailing Address 9025 WINSTON

City CARY State NC Zip Code 27513

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245716-90000

Amount of Each Disbursement this Period

8.18

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BP FDMS INSIDE

Mailing Address 28100 TORCH P

City WARRENVILLE State IL Zip Code 60555-3938

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245716-100000

Amount of Each Disbursement this Period

14.28

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. LA FARM BAKERY

Mailing Address 4248 NW CARY

City CARY State NC Zip Code 27513-8478

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245716-110000

Amount of Each Disbursement this Period

3.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. LA FARM BAKERY

Mailing Address 4248 NW CARY

City CARY State NC Zip Code 27513-8478

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245716-120000

Amount of Each Disbursement this Period

13.24

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245716-130000

Amount of Each Disbursement this Period

325.44

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. HARRIS TEETER 422		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 120-100 ST. A		Transaction ID : SB21B-245716-140000
City RALEIGH	State NC	
Zip Code 27609	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 10.11
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. SAXBYS COFFEE - RALEIGH -		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 141-111 PARK		Transaction ID : SB21B-245716-150000
City RALEIGH	State NC	
Zip Code 27607	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 4.91
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DELTA AIR LINES		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address ATLANTA AIRPO		Transaction ID : SB21B-245716-160000
City ATLANTA	State GA	
Zip Code 30344	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 251.60
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SHABA SHABU

Mailing Address 3080 WAKE FOR

City RALEIGH State NC Zip Code 27609-7844

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245716-170000

Amount of Each Disbursement this Period

24.26

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. LA FARM BAKERY

Mailing Address 4248 NW CARY

City CARY State NC Zip Code 27513-8478

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245716-180000

Amount of Each Disbursement this Period

9.77

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HARRIS TEETER 422

Mailing Address 120-100 ST. A

City RALEIGH State NC Zip Code 27609

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245716-190000

Amount of Each Disbursement this Period

19.83

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SHELL OIL

Mailing Address ATTN: TEXACO

City HOUSTON State TX Zip Code 77067

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245716-200000

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
											1	1	3	3							

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CHICK-FIL-A 00868

Mailing Address 4621 CAPITAL

City RALEIGH State NC Zip Code 27604-4479

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245716-210000

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
											8	7	1								

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. EXXONMOBIL CAT OUTSIDE

Mailing Address CUST SVC 1 80

City KANSAS CITY State MO Zip Code 64141

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245716-220000

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
											4	4	1	0							

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
											0	0	0								

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. LA FARM BAKERY

Mailing Address 4248 NW CARY

City CARY State NC Zip Code 27513-8478

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-230000

Amount of Each Disbursement this Period

13.01

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 8462

Mailing Address CAPITAL BLVD.

City RALEIGH State NC Zip Code 27604

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-240000

Amount of Each Disbursement this Period

4.26

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 9789

Mailing Address NORTH HILLS C

City RALEIGH State NC Zip Code 27609

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-250000

Amount of Each Disbursement this Period

7.17

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SAXBYS COFFEE - RALEIGH -

Mailing Address 141-111 PARK

City RALEIGH State NC Zip Code 27607

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-260000

Amount of Each Disbursement this Period

4.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 8462

Mailing Address CAPITAL BLVD.

City RALEIGH State NC Zip Code 27604

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-270000

Amount of Each Disbursement this Period

14.37

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. LA FARM BAKERY

Mailing Address 4248 NW CARY

City CARY State NC Zip Code 27513-8478

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-280000

Amount of Each Disbursement this Period

15.66

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 8217

Mailing Address PLEASANT VALL

City RALEIGH State NC Zip Code 27612

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245716-290000

Amount of Each Disbursement this Period

7.38

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HARRIS TEETER 069

Mailing Address 3201 EDWARDS

City RALEIGH State NC Zip Code 27612-5370

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245716-300000

Amount of Each Disbursement this Period

75.51

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 8245

Mailing Address FRANKLIN STRE

City CHAPEL HILL State NC Zip Code 27514

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245716-310000

Amount of Each Disbursement this Period

1.99

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 8245

Mailing Address FRANKLIN STRE

City CHAPEL HILL State NC Zip Code 27514

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-320000

Amount of Each Disbursement this Period

4.46

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS DIRECT SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-330000

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ENTERPRISE RENT A CAR

Mailing Address RALEIGH DURHA

City RALEIGH State NC Zip Code 27623

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245716-340000

Amount of Each Disbursement this Period

1295.29

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. PAPA JOHNS/SALSARITAS/EIN		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 2028 CROSS BE		Transaction ID : SB21B-245716-350000
City CHARLOTTE	State NC	
Zip Code 28217-2855	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 5.39
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DELTA AIR LINES		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address ATLANTA AIRPO		Transaction ID : SB21B-245716-360000
City ATLANTA	State GA	
Zip Code 30344	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 223.10
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ENTERPRISE RENT A CAR TOL		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 66 POWERHOUSE		Transaction ID : SB21B-245716-370000
City ROSLYN HEIGHT	State NY	
Zip Code 11577-1372	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 8.90
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245716-380000

Amount of Each Disbursement this Period

143.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245716-390000

Amount of Each Disbursement this Period

297.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245716-400000

Amount of Each Disbursement this Period

180.20

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SHERATON-PHX DWNTWN

Mailing Address 340 N 3RD ST

City PHOENIX State AZ Zip Code 85004

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245716-410000

Amount of Each Disbursement this Period

379.47

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ALOFT STARWOOD

Mailing Address 1900 E SPEEDW

City TUCSON State AZ Zip Code 85719

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245716-420000

Amount of Each Disbursement this Period

135.34

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES

Mailing Address ATLANTA AIRPO

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245716-430000

Amount of Each Disbursement this Period

251.20

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245716-440000

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245716-450000

Amount of Each Disbursement this Period

9.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245717

Amount of Each Disbursement this Period

600.90

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

600.90

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. PACER 800-676-6856 IR		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address SUITE 600		Transaction ID : SB21B-245717-10000
City SAN ANTONIO	State TX	
Purpose of Disbursement Publication & Dues		Amount of Each Disbursement this Period 325.90
Candidate Name		[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. America Votes		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1307 WALT WHI		Transaction ID : SB21B-245717-20000
City MELVILLE	State NY	
Purpose of Disbursement Publication & Dues		Amount of Each Disbursement this Period 275.00
Candidate Name		[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address PO Box 360001		Transaction ID : SB21B-245718
City Ft Lauderdale	State FL	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 1349.47
Candidate Name		See Attached Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	1349.47
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FIVE GUYS BURGERS & FRIES

Mailing Address SPC 3 RONALD

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245718-10000

Amount of Each Disbursement this Period

10.43

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HILTON HOTEL F & B

Mailing Address 255 COURTLAND

City ATLANTA State GA Zip Code 30303-1265

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245718-20000

Amount of Each Disbursement this Period

5.67

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS DIRECT SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245718-30000

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. QUEEN CITY GIFTS & N

Mailing Address 4901 DWIGHT E

City CHARLOTTE State NC Zip Code 28217-1441

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245718-40000

Amount of Each Disbursement this Period

4.28

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. POOR CALVINS

Mailing Address 510 PIEDMONT

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245718-50000

Amount of Each Disbursement this Period

50.81

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 8118

Mailing Address EAGLESLANDING

City STOCKBRIDGE State GA Zip Code 30281

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245718-60000

Amount of Each Disbursement this Period

10.11

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

A. HILTON HOTEL F & B

Full Name (Last, First, Middle Initial)

Mailing Address 255 COURTLAND

City ATLANTA State GA Zip Code 30303-1265

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 18 / 2014

Transaction ID : **SB21B-245718-70000**

Amount of Each Disbursement this Period: 15.93

[MEMO ITEM]
Memo Entry

B. MARY MACS TEA ROOM

Full Name (Last, First, Middle Initial)

Mailing Address 224 PONCE DE

City ATLANTA State GA Zip Code 30308-1938

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 18 / 2014

Transaction ID : **SB21B-245718-80000**

Amount of Each Disbursement this Period: 75.42

[MEMO ITEM]
Memo Entry

C. EXPEDIA TRAVEL

Full Name (Last, First, Middle Initial)

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 18 / 2014

Transaction ID : **SB21B-245718-90000**

Amount of Each Disbursement this Period: 190.24

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245718-10000

Amount of Each Disbursement this Period

18.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245718-110000

Amount of Each Disbursement this Period

50.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245718-120000

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HILTON HOTEL F & B

Mailing Address 255 COURTLAND

City ATLANTA State GA Zip Code 30303-1265

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245718-160000

Amount of Each Disbursement this Period

2.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HIGHLAND BAKERY

Mailing Address 655 HIGHLAND

City ATLANTA State GA Zip Code 30312-1464

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245718-170000

Amount of Each Disbursement this Period

18.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HILTON HOTEL F & B

Mailing Address 255 COURTLAND

City ATLANTA State GA Zip Code 30303-1265

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245718-180000

Amount of Each Disbursement this Period

16.74

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HILTON HOTEL

Mailing Address 255 COURTLAND

City ATLANTA State GA Zip Code 30303-1265

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245718-190000

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HERTZ RAC FIREFLY

Mailing Address CREDIT BILLIN

City OKLAHOMA CITY State OK Zip Code 73134

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245718-200000

Amount of Each Disbursement this Period

299.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SHELL OIL

Mailing Address ATTN: TEXACO

City HOUSTON State TX Zip Code 77067

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245718-210000

Amount of Each Disbursement this Period

20.38

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. CHICK-FIL-A

Mailing Address PHILADELPHIA

City PHILADELPHIA State PA Zip Code 19153

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245718-220000**

Amount of Each Disbursement this Period: 5.34

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
B. FIVE GUYS BURGERS #1583

Mailing Address 6000 N TERMIN

City ATLANTA State GA Zip Code 30320-7400

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245718-230000**

Amount of Each Disbursement this Period: 11.35

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
C. US AIRWAYS DIRECT SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245718-240000**

Amount of Each Disbursement this Period: 25.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HYATT REGENCY ATLANTA

Mailing Address 265 PEACHTREE

City ATLANTA State GA Zip Code 30303-1204

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245718-250000

Amount of Each Disbursement this Period

32.49

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HILTON HOTEL

Mailing Address 255 COURTLAND

City ATLANTA State GA Zip Code 30303-1265

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245718-260000

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. King Cab Company

Mailing Address 600 MORGAN FA

City ATLANTA State GA Zip Code 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245718-270000

Amount of Each Disbursement this Period

23.80

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RETAIL

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245719-30000

Amount of Each Disbursement this Period

6.04

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RETAIL

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245719-40000

Amount of Each Disbursement this Period

5.69

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RETAIL

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245719-50000

Amount of Each Disbursement this Period

4.95

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RETAIL

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245719-60000

Amount of Each Disbursement this Period

4.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245719-70000

Amount of Each Disbursement this Period

148.48

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SQUARE

Mailing Address ST 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245719-80000

Amount of Each Disbursement this Period

8.31

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245719-90000

Amount of Each Disbursement this Period

3	1	7	1
31.71			

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ROSS STORE 113

Mailing Address 1233 APALACHE

City TALLAHASSEE State FL Zip Code 32301-4543

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245719-10000

Amount of Each Disbursement this Period

3	3	3	1
33.31			

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RETAIL

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245719-110000

Amount of Each Disbursement this Period

4	9	5
4.95		

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0
0.00		

0	0	0
0.00		

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT TRANSACTION

Mailing Address 600 MORGAN FA

City ATLANTA State GA Zip Code 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245719-120000

Amount of Each Disbursement this Period

14.58

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS DIRECT SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245719-130000

Amount of Each Disbursement this Period

63.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. L & Z TRANSPORTATION INC

Mailing Address 3706 MOUNT VE

City ALEXANDRIA State VA Zip Code 22305-2440

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245719-140000

Amount of Each Disbursement this Period

20.24

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

--

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TALLAHASSEE AIRPORT SHOP

Mailing Address 3300 CAPITAL

City TALLAHASSEE State FL Zip Code 32310-8732

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245719-150000

Amount of Each Disbursement this Period

1.08

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS WEB SALES

Mailing Address ATTN RWE-STX

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245719-160000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NATIONAL CAR RENTAL

Mailing Address 3300 CAPITAL

City TALLAHASSEE State FL Zip Code 32310

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245719-170000

Amount of Each Disbursement this Period

650.26

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS C #150

Mailing Address 5501 JOSH BIR

City CHARLOTTE State NC Zip Code 28208-5750

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245719-180000

Amount of Each Disbursement this Period

4.76

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DOUBLE TREE

Mailing Address 101 S ADAMS S

City TALLAHASSEE State FL Zip Code 32301-7719

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245719-190000

Amount of Each Disbursement this Period

167.63

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245719-200000

Amount of Each Disbursement this Period

17.73

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NATIONAL CAR RENTAL

Mailing Address 3300 CAPITAL

City TALLAHASSEE State FL Zip Code 32310

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245719-210000

Amount of Each Disbursement this Period

20.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RIDECHARGE INC

Mailing Address 5904 RICHMOND

City ALEXANDRIA State VA Zip Code 22303-1864

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245719-220000

Amount of Each Disbursement this Period

9.28

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245719-230000

Amount of Each Disbursement this Period

9.26

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 7845

Mailing Address 1429 P STREET

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245719-240000

Amount of Each Disbursement this Period

6.93

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RIDECHARGE INC

Mailing Address 5904 RICHMOND

City ALEXANDRIA State VA Zip Code 22303-1864

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245719-250000

Amount of Each Disbursement this Period

18.36

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 7281

Mailing Address 1734 L STREET

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245719-260000

Amount of Each Disbursement this Period

11.39

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CUSTOMIZED GIRL

Mailing Address 2282 WESTBROO

City State Zip Code
COLUMBUS OH 43228-9416

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245719-270000

Amount of Each Disbursement this Period

218.11

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 360001

City State Zip Code
Fort Lauderdale FL 33336

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245721

Amount of Each Disbursement this Period

11.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. SQUARE

Mailing Address STE 600

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245721-10000

Amount of Each Disbursement this Period

11.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

11.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245722

Amount of Each Disbursement this Period

1095.84

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. WALGREENS 07064

Mailing Address HURSTBORNE PA

City LOUISVILLE State KY Zip Code 40222

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245722-10000

Amount of Each Disbursement this Period

15.87

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS COFFEE

Mailing Address 2401 UTAH AVE

City SEATTLE State WA Zip Code 98134-1435

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245722-20000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1095.84

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS COFFEE

Mailing Address 2401 UTAH AVE

City SEATTLE State WA Zip Code 98134-1435

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245722-30000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS COFFEE

Mailing Address 2401 UTAH AVE

City SEATTLE State WA Zip Code 98134-1435

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245722-40000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS COFFEE

Mailing Address 2401 UTAH AVE

City SEATTLE State WA Zip Code 98134-1435

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245722-50000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS COFFEE

Mailing Address 2401 UTAH AVE

City SEATTLE State WA Zip Code 98134-1435

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245722-60000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS COFFEE

Mailing Address 2401 UTAH AVE

City SEATTLE State WA Zip Code 98134-1435

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245722-70000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS COFFEE

Mailing Address 2401 UTAH AVE

City SEATTLE State WA Zip Code 98134-1435

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245722-80000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS COFFEE

Mailing Address 2401 UTAH AVE

City SEATTLE State WA Zip Code 98134-1435

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2014

Transaction ID : **SB21B-245722-90000**

Amount of Each Disbursement this Period: 25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2014

Transaction ID : **SB21B-245722-10000**

Amount of Each Disbursement this Period: 14.52

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PANERA BREAD 825

Mailing Address 2573 RICHMOND

City LEXINGTON State KY Zip Code 40509-1522

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2014

Transaction ID : **SB21B-245722-110000**

Amount of Each Disbursement this Period: 8.87

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. STARS OF LOUISVILLE 00123

Mailing Address 10 STANDIFORD

City LOUISVILLE State KY Zip Code 40209

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245722-120000**

Amount of Each Disbursement this Period: 34.54

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
B. US AIRWAYS DIRECT SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245722-130000**

Amount of Each Disbursement this Period: 25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
C. BUDGET CREDIT CLUB DEPT.

Mailing Address 300 CENTRE PO

City VIRGINIA BEAC State VA Zip Code 23462-4415

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245722-140000**

Amount of Each Disbursement this Period: 797.04

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245723

Amount of Each Disbursement this Period

430.54

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. HIGHLAND BAKERY MIDTOWN

Mailing Address 1180 PEACHTRE

City ATLANTA State GA Zip Code 30309-7516

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245723-10000

Amount of Each Disbursement this Period

13.79

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. EINSTEIN BAGELS 2833

Mailing Address 1163 W PEACHT

City ATLANTA State GA Zip Code 30309-3647

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245723-20000

Amount of Each Disbursement this Period

8.36

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

430.54

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WHOLE FOODS MARKETPNC

Mailing Address 650 PONCE DE

City ATLANTA State GA Zip Code 30308-1864

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245723-30000

Amount of Each Disbursement this Period

11.17

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SHELL OIL

Mailing Address ATTN: TEXACO

City HOUSTON State TX Zip Code 77067

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245723-40000

Amount of Each Disbursement this Period

29.68

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RIDECHARGE INC

Mailing Address 5904 RICHMOND

City ALEXANDRIA State VA Zip Code 22303-1864

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245723-50000

Amount of Each Disbursement this Period

27.56

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. PARADIES-CHARLOTTE 9704		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address CHARLOTTE-DOU		Transaction ID : SB21B-245723-60000
City CHARLOTTE State NC Zip Code 28208	Amount of Each Disbursement this Period 9.09	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. US AIRWAYS DIRECT SALES		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 4000 E SKY HA		Transaction ID : SB21B-245723-70000
City PHOENIX State AZ Zip Code 85034-0664	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. BOJANGLES		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 5501 JOSH BIR		Transaction ID : SB21B-245723-80000
City CHARLOTTE State NC Zip Code 28208-5750	Amount of Each Disbursement this Period 4.32	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DOLLAR RENT A CAR ATL AIR

Mailing Address 4003 MAIN ST

City ATLANTA State GA Zip Code 30337-4309

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245723-90000

Amount of Each Disbursement this Period

205.88

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245723-10000

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245723-110000

Amount of Each Disbursement this Period

7.93

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AMAZON MARKEPLACE NA - PA

Mailing Address 440 TERRY AVE

City SEATTLE State WA Zip Code 98109-5210

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245723-120000

Amount of Each Disbursement this Period

23.47

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TRADER JOES 653

Mailing Address 1101 25TH ST

City WASHINGTON State DC Zip Code 20037-1407

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245723-130000

Amount of Each Disbursement this Period

49.29

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245726

Amount of Each Disbursement this Period

284.96

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

284.96

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. KROGER FOODS L327

Mailing Address 2710 W BROADW

City LOUISVILLE State KY Zip Code 40211-1320

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245726-10000

Amount of Each Disbursement this Period

28.94

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MCDONALD'S F7110

Mailing Address 2720 W BROADW

City LOUISVILLE State KY Zip Code 40211-1320

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245726-20000

Amount of Each Disbursement this Period

31.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PF CHANGS 9975

Mailing Address 9120 SHELBYVI

City LOUISVILLE State KY Zip Code 40222-5110

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245726-30000

Amount of Each Disbursement this Period

23.35

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS COFFEE

Mailing Address 2401 UTAH AVE

City SEATTLE State WA Zip Code 98134-1435

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245726-40000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RAMSIS CAFE

Mailing Address 1293 BARDSTOW

City LOUISVILLE State KY Zip Code 40204-1303

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245726-50000

Amount of Each Disbursement this Period

39.58

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS DIRECT SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245726-60000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. PANERA BREAD 825

Mailing Address 2573 RICHMOND

City LEXINGTON State KY Zip Code 40509-1522

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245726-70000

Amount of Each Disbursement this Period

9.67

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BEAUDEVIN MAIN 001220092

Mailing Address 5501 JOSH BIR

City CHARLOTTE State NC Zip Code 28208-5750

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245726-80000

Amount of Each Disbursement this Period

79.12

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245726-90000

Amount of Each Disbursement this Period

23.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Design/Graphics

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245727

Amount of Each Disbursement this Period

123.96

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. Thenounproject.com

Mailing Address 3180 18TH ST

City SAN FRANCISCO State CA Zip Code 94110-2043

Purpose of Disbursement
Design/Graphics

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245727-10000

Amount of Each Disbursement this Period

1.99

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Thenounproject.com

Mailing Address 3180 18TH ST

City SAN FRANCISCO State CA Zip Code 94110-2043

Purpose of Disbursement
Design/Graphics

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245727-20000

Amount of Each Disbursement this Period

1.99

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

123.96

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ISTOCK PHOTO

Mailing Address ATTN: TREASUR

City State Zip Code
SEATTLE WA 98104

Purpose of Disbursement
Design/Graphics

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
12 / 18 / 2014

Transaction ID : SB21B-245727-60000

Amount of Each Disbursement this Period

33.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft Lauderdale FL 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245728

Amount of Each Disbursement this Period

224.64

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. CHIPOTLE 0122

Mailing Address 1837 M ST NW

City State Zip Code
WASHINGTON DC 20036-2523

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245728-10000

Amount of Each Disbursement this Period

42.75

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

224.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FLOUR BAKERY & CAFE

Mailing Address 12 FARNSWORTH

City BOSTON State MA Zip Code 02210-1224

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245728-20000

Amount of Each Disbursement this Period

62.06

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SEAMLESS.

Mailing Address 1065 AVENUE O

City NEW YORK State NY Zip Code 10018-1878

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245728-30000

Amount of Each Disbursement this Period

30.56

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FOODLER.COM

Mailing Address 153 TOWNSEND

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245728-40000

Amount of Each Disbursement this Period

89.27

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729

Amount of Each Disbursement this Period

4	2	1	.	7	1
---	---	---	---	---	---

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-10000

Amount of Each Disbursement this Period

7	.	4	2
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-20000

Amount of Each Disbursement this Period

9	.	6	6
---	---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4	2	1	.	7	1
---	---	---	---	---	---

7	.	4	2
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-30000

Amount of Each Disbursement this Period

6.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-40000

Amount of Each Disbursement this Period

7.18

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-50000

Amount of Each Disbursement this Period

10.30

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RITE AID 11790

Mailing Address 891 PONCE DE

City ATLANTA State GA Zip Code 30306-4267

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-60000

Amount of Each Disbursement this Period

2.38

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 170 CARNEGIE WY NW 50221

Mailing Address 170 CARNEGIE

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-70000

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-80000

Amount of Each Disbursement this Period

10.02

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 8320

Mailing Address 21 14TH STREE

City ATLANTA State GA Zip Code 30309

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245729-90000

Amount of Each Disbursement this Period

7.29

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 170 CARNEGIE WY NW 50221

Mailing Address 170 CARNEGIE

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245729-10000

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. EINSTEIN BAGELS 2833

Mailing Address 1163 W PEACHT

City ATLANTA State GA Zip Code 30309-3647

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245729-110000

Amount of Each Disbursement this Period

5.77

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245729-120000

Amount of Each Disbursement this Period

6.96

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TACO BELL # 4431

Mailing Address 1180 POWDER S

City MARIETTA State GA Zip Code 30064-5287

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245729-130000

Amount of Each Disbursement this Period

6.21

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DOUBLETREE ATLANTA DOWNTOWN

Mailing Address 160 SPRING ST

City ATLANTA State GA Zip Code 30303-2008

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245729-140000

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-150000

Amount of Each Disbursement this Period

6	.	8	7
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SHELL OIL

Mailing Address 12700 NORTHBO

City State Zip Code
HOUSTON TX 77067-2552

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-160000

Amount of Each Disbursement this Period

1	.	3	9
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT

Mailing Address 90 NASSAU ST

City State Zip Code
PRINCETON NJ 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-170000

Amount of Each Disbursement this Period

5	.	8	2
---	---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TRADER JOES 730

Mailing Address 931 MONROE DR

City ATLANTA State GA Zip Code 30308-1796

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-180000

Amount of Each Disbursement this Period

21.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 170 CARNEGIE WY NW 50221

Mailing Address 170 CARNEGIE

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-190000

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WESTIN PEACHTREERSTR

Mailing Address 210 PEACHTREE

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-200000

Amount of Each Disbursement this Period

5.89

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-210000

Amount of Each Disbursement this Period

6.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-220000

Amount of Each Disbursement this Period

7.66

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOSPITALITY TECHNICAL SER

Mailing Address 2940 HEBRON P

City HEBRON State KY Zip Code 41048-9534

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-230000

Amount of Each Disbursement this Period

12.95

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CVS/PHARMACY #10043

Mailing Address 235 PEACHTREE

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245729-240000

Amount of Each Disbursement this Period

15.98

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245729-250000

Amount of Each Disbursement this Period

6.25

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245729-260000

Amount of Each Disbursement this Period

6.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245729-270000

Amount of Each Disbursement this Period

6.85

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PAPIS CUBAN & CARRIBEAN

Mailing Address 216 PONCE DE

City State Zip Code
ATLANTA GA 30308-1913

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245729-280000

Amount of Each Disbursement this Period

42.39

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RIDECHARGE INC

Mailing Address 5904 RICHMOND

City State Zip Code
ALEXANDRIA VA 22303-1864

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245729-290000

Amount of Each Disbursement this Period

24.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HYATT REGENCY ATLANTA

Mailing Address 265 PEACHTREE

City ATLANTA State GA Zip Code 30303-1204

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-300000

Amount of Each Disbursement this Period

40.72

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245729-310000

Amount of Each Disbursement this Period

21.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730

Amount of Each Disbursement this Period

374.39

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

374.39

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ALTERRA COFFEE ROASTERS-T

Mailing Address 2999 N HUMBOL

City MILWAUKEE State WI Zip Code 53212-2631

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245730-10000

Amount of Each Disbursement this Period

11.76

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245730-20000

Amount of Each Disbursement this Period

9.64

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT TRANSACTION

Mailing Address 600 MORGAN FA

City ATLANTA State GA Zip Code 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245730-30000

Amount of Each Disbursement this Period

7.85

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245730-40000

Amount of Each Disbursement this Period

2.22

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ALTERRA COFFEE ROASTERS-T

Mailing Address 2999 N HUMBOL

City MILWAUKEE State WI Zip Code 53212-2631

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245730-50000

Amount of Each Disbursement this Period

4.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245730-60000

Amount of Each Disbursement this Period

9.73

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FROMAGINATION

Mailing Address 12 S CARROLL

City MADISON State WI Zip Code 53703-3309

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245730-70000

Amount of Each Disbursement this Period

9.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245730-80000

Amount of Each Disbursement this Period

2.22

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. THE GREAT DANE PUB

Mailing Address 123 E DOTY ST

City MADISON State WI Zip Code 53703-5134

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245730-90000

Amount of Each Disbursement this Period

17.67

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-10000

Amount of Each Disbursement this Period

9.79

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-110000

Amount of Each Disbursement this Period

8.84

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT

Mailing Address 90 NASSAU ST

City State Zip Code
PRINCETON NJ 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-120000

Amount of Each Disbursement this Period

2.48

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CAPITAL TAP HAUS

Mailing Address 107 STATE ST

City MADISON State WI Zip Code 53703

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-130000

Amount of Each Disbursement this Period

21.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-140000

Amount of Each Disbursement this Period

9.23

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ALTERRA COFFEE ROASTERS-T

Mailing Address 2999 N HUMBOL

City MILWAUKEE State WI Zip Code 53212-2631

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-150000

Amount of Each Disbursement this Period

8.50

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245730-160000

Amount of Each Disbursement this Period

3.69

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245730-170000

Amount of Each Disbursement this Period

8.97

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245730-180000

Amount of Each Disbursement this Period

9.18

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-190000

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-200000

Amount of Each Disbursement this Period

6.66

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-210000

Amount of Each Disbursement this Period

9.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-220000

Amount of Each Disbursement this Period

10.07

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FROMAGINATION

Mailing Address 12 S CARROLL

City MADISON State WI Zip Code 53703-3309

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-230000

Amount of Each Disbursement this Period

19.78

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SQUARE WINE COMPANY

Mailing Address 5 N PINCKNEY

City MADISON State WI Zip Code 53703-2829

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-240000

Amount of Each Disbursement this Period

18.99

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT TRANSACTION

Mailing Address 600 MORGAN FA

City ATLANTA State GA Zip Code 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-250000

Amount of Each Disbursement this Period

19.08

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-260000

Amount of Each Disbursement this Period

11.36

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-270000

Amount of Each Disbursement this Period

9.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-280000

Amount of Each Disbursement this Period

11.31

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ALTERRA COFFEE ROASTERS-T

Mailing Address 2999 N HUMBOL

City MILWAUKEE State WI Zip Code 53212-2631

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-290000

Amount of Each Disbursement this Period

7.97

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AJ BOMBERS

Mailing Address 201 W GORHAM

City MADISON State WI Zip Code 53703-2099

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245730-300000

Amount of Each Disbursement this Period

15.30

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245730-310000

Amount of Each Disbursement this Period

9.97

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245730-320000

Amount of Each Disbursement this Period

11.78

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245730-330000

Amount of Each Disbursement this Period

24.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES

Mailing Address DEPT HQJ-CM

City HOUSTON State TX Zip Code 77002-7363

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245730-340000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245731

Amount of Each Disbursement this Period

443.10

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245731-10000

Amount of Each Disbursement this Period

10.02

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

443.10

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CIRCLE K #7089

Mailing Address 53 MAIN ST

City ORONO State ME Zip Code 04473

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245731-20000

Amount of Each Disbursement this Period

4.57

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SUBWAY 10146

Mailing Address 53 MAIN ST

City ORONO State ME Zip Code 04473-4001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245731-30000

Amount of Each Disbursement this Period

5.27

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245731-40000

Amount of Each Disbursement this Period

3.35

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245731-50000

Amount of Each Disbursement this Period

9.32

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CIRCLE K #7089

Mailing Address 53 MAIN ST

City ORONO State ME Zip Code 04473

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245731-60000

Amount of Each Disbursement this Period

4.01

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245731-70000

Amount of Each Disbursement this Period

2.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245731-80000

Amount of Each Disbursement this Period

3.35

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245731-90000

Amount of Each Disbursement this Period

9.32

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS

Mailing Address 76 MAIN RD N

City HAMPDEN State ME Zip Code 04444

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245731-100000

Amount of Each Disbursement this Period

3.54

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245731-110000

Amount of Each Disbursement this Period

2.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245731-120000

Amount of Each Disbursement this Period

9.32

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245731-130000

Amount of Each Disbursement this Period

4.70

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245731-140000

Amount of Each Disbursement this Period

3.35

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CIRCLE K #7089

Mailing Address 53 MAIN ST

City ORONO State ME Zip Code 04473

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245731-150000

Amount of Each Disbursement this Period

31.51

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DMF INTERNATIONAL INC

Mailing Address 299 GODFREY B

City BANGOR State ME Zip Code 04401-3022

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245731-160000

Amount of Each Disbursement this Period

10.80

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UNION ST IRVING #85039

Mailing Address 554 UNION STR

City BANGOR State ME Zip Code 04401

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245731-170000

Amount of Each Disbursement this Period

5.48

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BUDGET CREDIT CLUB DEPT.

Mailing Address 300 CENTRE PO

City VIRGINIA BEAC State VA Zip Code 23462-4415

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245731-180000

Amount of Each Disbursement this Period

321.19

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245732

Amount of Each Disbursement this Period

820.06

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

820.06

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245732-10000

Amount of Each Disbursement this Period

3.08

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WENDY'S OLD FASHIONED HAM

Mailing Address 15900 HICKMAN

City CLIVE State IA Zip Code 50325-7948

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245732-20000

Amount of Each Disbursement this Period

6.97

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 11258

Mailing Address WEST DES MOIN

City WEST DES MOIN State IA Zip Code 50266

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245732-30000

Amount of Each Disbursement this Period

6.83

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. PANERA BREAD 3207

Mailing Address 6740 UNIVERSI

City WEST DES MOIN State IA Zip Code 50266-7721

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245732-40000

Amount of Each Disbursement this Period

11.64

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 11258

Mailing Address WEST DES MOIN

City WEST DES MOIN State IA Zip Code 50266

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245732-50000

Amount of Each Disbursement this Period

9.16

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ARBY'S #7912

Mailing Address 15701 HICKMAN

City CLIVE State IA Zip Code 50325-7904

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245732-60000

Amount of Each Disbursement this Period

6.03

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS 11258

Mailing Address WEST DES MOIN

City WEST DES MOIN State IA Zip Code 50266

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245732-70000

Amount of Each Disbursement this Period

9.16

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PANERA BREAD 3207

Mailing Address 6740 UNIVERSI

City WEST DES MOIN State IA Zip Code 50266-7721

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245732-80000

Amount of Each Disbursement this Period

8.66

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HY-VEE FOODS 1873

Mailing Address 1005 E HICKMA

City WAUKEE State IA Zip Code 50263-8720

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245732-90000

Amount of Each Disbursement this Period

24.13

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WAUKEE GAS #5873

Mailing Address 1025 E HICKMA

City WAUKEE State IA Zip Code 50263-8720

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245732-10000

Amount of Each Disbursement this Period

27.48

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PANCHEROS MEXICAN

Mailing Address 165 S JORDAN

City WEST DES MOIN State IA Zip Code 50266-8110

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245732-110000

Amount of Each Disbursement this Period

29.42

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BARNES & NOBLE 2220

Mailing Address 101 JORDAN CR

City WEST DES MOIN State IA Zip Code 50266-8128

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245732-120000

Amount of Each Disbursement this Period

2.39

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HY-VEE FOODS 1873

Mailing Address 1005 E HICKMA

City WAUKEE State IA Zip Code 50263-8720

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245732-130000

Amount of Each Disbursement this Period

7.61

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 10953

Mailing Address 111TH & HICKM

City CLIVE State IA Zip Code 50325

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245732-140000

Amount of Each Disbursement this Period

4.93

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CULVERS URBANDALE

Mailing Address 1101 JORDAN C

City WEST DES MOIN State IA Zip Code 50266-5816

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245732-150000

Amount of Each Disbursement this Period

3.48

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. CULVERS URBANDALE		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1101 JORDAN C		Transaction ID : SB21B-245732-160000
City WEST DES MOIN	State IA	
Zip Code 50266-5816	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 7.09
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CASEYS GEN'L STORES 2179		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1955 UNIVERSI		Transaction ID : SB21B-245732-170000
City WAUKEE	State IA	
Zip Code 50263-8191	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 29.86
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. STARBUCKS 10953		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 111TH & HICKM		Transaction ID : SB21B-245732-180000
City CLIVE	State IA	
Zip Code 50325	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 7.21
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WALGREENS 05060

Mailing Address 12753 UNIVERS

City CLIVE State IA Zip Code 50325-8246

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245732-190000

Amount of Each Disbursement this Period

2.29

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RETAIL

Mailing Address 6902 PINE ST

City OMAHA State NE Zip Code 68106-2855

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245732-200000

Amount of Each Disbursement this Period

3.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NOODLES & CO 539

Mailing Address STE 6110

City DES MOINES State IA Zip Code 50310

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245732-210000

Amount of Each Disbursement this Period

8.14

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. QUIKTRIP 559 CAT

Mailing Address 5701 FLEUR DR

City State Zip Code
DES MOINES IA 50321-2843

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245732-220000

Amount of Each Disbursement this Period

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PERKINS RSTR 1233

Mailing Address 1224 JORDAN C

City State Zip Code
WEST DES MOIN IA 50266-5825

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245732-230000

Amount of Each Disbursement this Period

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AVIS RENT A CAR

Mailing Address MUNICIPAL AIR

City State Zip Code
DES MOINES IA 50321

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-245732-240000

Amount of Each Disbursement this Period

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TAXI CHARGE -DC

Mailing Address 465 UTICA AVE

City State Zip Code
BROOKLYN NY 11203

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245732-250000

Amount of Each Disbursement this Period

21.39

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245732-260000

Amount of Each Disbursement this Period

10.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET S

City State Zip Code
SAN FRANCISCO CA 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245732-270000

Amount of Each Disbursement this Period

56.84

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

--

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245733

Amount of Each Disbursement this Period

565.32

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. PENNYPACKERS

Mailing Address 514 C MEDFORD

City SOMERVILLE State MA Zip Code 02145

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245733-10000

Amount of Each Disbursement this Period

10.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS 300301

Mailing Address 333 LYNNWAY

City LYNN State MA Zip Code 01901-1705

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245733-20000

Amount of Each Disbursement this Period

6.86

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

565.32

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NATURAL GROCERY

Mailing Address 507 MEDFORD S

City SOMERVILLE State MA Zip Code 02145

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245733-30000

Amount of Each Disbursement this Period

7.07

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245733-40000

Amount of Each Disbursement this Period

4.71

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CVS/PHARMACY #00314

Mailing Address 45 ATLANTIC A

City MARBLEHEAD State MA Zip Code 01945-3103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245733-50000

Amount of Each Disbursement this Period

23.12

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DUNKIN DONUTS 339658

Mailing Address 50 BROADWAY

City EVERETT State MA Zip Code 02149-2415

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245733-60000

Amount of Each Disbursement this Period

3.73

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS

Mailing Address 1885 REVERE B

City EVERETT State MA Zip Code 02149-5923

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245733-70000

Amount of Each Disbursement this Period

6.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CHIPOTLE 0870

Mailing Address 616 FELLOSWAY

City MEDFORD State MA Zip Code 02155-4959

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245733-80000

Amount of Each Disbursement this Period

11.72

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. BURGER DRIVE

Mailing Address 702 ASSEMBLY

City SOMERVILLE State MA Zip Code 02145

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245733-120000

Amount of Each Disbursement this Period

9.78

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 19383

Mailing Address 700 ASSEMBLY

City SOMERVILLE State MA Zip Code 02145

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245733-130000

Amount of Each Disbursement this Period

7.28

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. 7-ELEVEN STOREONLY

Mailing Address CITY PLACE CE

City DALLAS State TX Zip Code 75204

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245733-140000

Amount of Each Disbursement this Period

3.30

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. OTHER

Mailing Address 90 NASSAU ST

City PRINCETON State NJ Zip Code 08542-4529

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245733-150000

Amount of Each Disbursement this Period

22.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 19383

Mailing Address 700 ASSEMBLY

City SOMERVILLE State MA Zip Code 02145

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245733-160000

Amount of Each Disbursement this Period

6.36

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CVS/PHARMACY #00314

Mailing Address 45 ATLANTIC A

City MARBLEHEAD State MA Zip Code 01945-3103

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245733-170000

Amount of Each Disbursement this Period

7.27

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DUNKIN DONUTS

Mailing Address 1885 REVERE B

City EVERETT State MA Zip Code 02149-5923

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245733-240000

Amount of Each Disbursement this Period

4.05

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245733-250000

Amount of Each Disbursement this Period

4.71

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUT 300212

Mailing Address 76 MIDDLESEX

City SOMERVILLE State MA Zip Code 02145-1106

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245733-260000

Amount of Each Disbursement this Period

6.30

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. KMART #03486

Mailing Address 77 MIDDLESEX

City SOMERVILLE State MA Zip Code 02145-1192

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245733-270000

Amount of Each Disbursement this Period

8.91

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 100 CLARENDON

Mailing Address 100 CLARENDON

City BOSTON State MA Zip Code 02116

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245733-280000

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AU BON PAIN #192

Mailing Address TERMINAL B US

City BOSTON State MA Zip Code 02128

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245733-290000

Amount of Each Disbursement this Period

5.13

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STARBUCKS USAIR POST BOS

Mailing Address BOSTON LOGAN

City BOSTON State MA Zip Code 02128

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245733-300000**

Amount of Each Disbursement this Period: 5.14

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GIBBS SERVICE STATION

Mailing Address 441 HUMPHREY

City SWAMPSCOTT State MA Zip Code 01907-2566

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245733-310000**

Amount of Each Disbursement this Period: 16.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ENTERPRISE RENT A CAR

Mailing Address BOSTON LOGAN

City BOSTON State MA Zip Code 02128

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2014

Transaction ID : **SB21B-245733-320000**

Amount of Each Disbursement this Period: 255.25

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS DIRECT SALES

Mailing Address 4000 E SKY HA

City PHOENIX State AZ Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245733-330000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ENTERPRISE RENT A CAR TOL

Mailing Address 66 POWERHOUSE

City ROSLYN HEIGHT State NY Zip Code 11577-1372

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245733-340000

Amount of Each Disbursement this Period

3.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245734

Amount of Each Disbursement this Period

550.41

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

550.41

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MCDONALDS #6020

Mailing Address 1429 HWY 51 W

City **STOUGHTON** State **WI** Zip Code **53589**

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245734-10000

Amount of Each Disbursement this Period

8	9	4
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CULVER'S OF W MILWAUKEE

Mailing Address 1641 MILLER P

City **MILWAUKEE** State **WI** Zip Code **53214-3605**

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245734-20000

Amount of Each Disbursement this Period

9	5	4
---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MCDONALD'S # 11364

Mailing Address 18695 W BLUEM

City **BROOKFIELD** State **WI** Zip Code **53045-2932**

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245734-30000

Amount of Each Disbursement this Period

8	0	7
---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0
---	---	---

0	0	0
---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ALTERRA COFFEE ROASTERS-T

Mailing Address 2999 N HUMBOL

City MILWAUKEE State WI Zip Code 53212-2631

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245734-40000

Amount of Each Disbursement this Period

1	9	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ALTERRA COFFEE ROASTERS-T

Mailing Address 2999 N HUMBOL

City MILWAUKEE State WI Zip Code 53212-2631

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245734-50000

Amount of Each Disbursement this Period

2	1	1	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MCDONALDS #6020

Mailing Address 1429 HWY 51 W

City STOUGHTON State WI Zip Code 53589

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245734-60000

Amount of Each Disbursement this Period

8	9	4	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ALTERRA COFFEE ROASTERS-T

Mailing Address 2999 N HUMBOL

City MILWAUKEE State WI Zip Code 53212-2631

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245734-70000

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
																					1.90

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MCDONALDS #6020

Mailing Address 1429 HWY 51 W

City STOUGHTON State WI Zip Code 53589

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245734-80000

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
																					8.94

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. EXXONMOBIL CAT OUTSIDE

Mailing Address CUST SVC 1 80

City KANSAS CITY State MO Zip Code 64141

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245734-90000

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
																					50.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
																					0.00

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TIPSY COW

Mailing Address 102 KING ST

City MADISON State WI Zip Code 53703-3314

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245734-10000

Amount of Each Disbursement this Period

19.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 2678

Mailing Address RED ARROW WA

City MILWAUKEE State WI Zip Code 53202

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245734-110000

Amount of Each Disbursement this Period

2.49

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS 2678

Mailing Address RED ARROW WA

City MILWAUKEE State WI Zip Code 53202

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245734-120000

Amount of Each Disbursement this Period

2.23

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MSN ANCORA ROASTERS PRE S

Mailing Address STE 1

City MADISON State WI Zip Code 53704

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245734-130000

Amount of Each Disbursement this Period

7	0	4
---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. EXXONMOBIL CAT OUTSIDE

Mailing Address CUST SVC 1 80

City KANSAS CITY State MO Zip Code 64141

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245734-140000

Amount of Each Disbursement this Period

1	5	0	6
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AJ BOMBERS

Mailing Address 1241 N WATER

City MILWAUKEE State WI Zip Code 53202-2505

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245734-150000

Amount of Each Disbursement this Period

2	0	7	1
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[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0
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0	0	0
---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ENTERPRISE RENT A CAR

Mailing Address MADISON AIRPO

City MADISON State WI Zip Code 53704

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		1	8			2	0	1	4		

Transaction ID : SB21B-245734-160000

Amount of Each Disbursement this Period

3	8	3	.	2	4
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		1	8			2	0	1	4		

Transaction ID : SB21B-245735

Amount of Each Disbursement this Period

1	0	8	.	4	9
---	---	---	---	---	---

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. WALGREENS 09005

Mailing Address 200 E BROADWA

City LOUISVILLE State KY Zip Code 40202-2008

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		1	8			2	0	1	4		

Transaction ID : SB21B-245735-10000

Amount of Each Disbursement this Period

3	6	.	4	9
---	---	---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1	0	8	.	4	9
---	---	---	---	---	---

1	0	8	.	4	9
---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STAPLES 1803

Mailing Address 3030 BARDSTOW

City LOUISVILLE State KY Zip Code 40205-3020

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245735-20000

Amount of Each Disbursement this Period

35.49

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STEAK N SHAKE 708

Mailing Address 4913 DIXIE HW

City LOUISVILLE State KY Zip Code 40216-2501

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245735-30000

Amount of Each Disbursement this Period

35.51

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SPEEDWAY

Mailing Address 500 SPEEDWAY

City ENON State OH Zip Code 45323-1056

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245735-40000

Amount of Each Disbursement this Period

42.69

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WENDYS BF SOUTH #208

Mailing Address 3422 TAYLOR B

City LOUISVILLE State KY Zip Code 40215-2607

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245735-50000

Amount of Each Disbursement this Period

2	5	9	3
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 2541

Mailing Address HURSTBOURNE &

City LOUISVILLE State KY Zip Code 40222

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245735-60000

Amount of Each Disbursement this Period

1	0	5	.	8	8
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DAIRY QUEEN #11060

Mailing Address 9656 BLUEGRAS

City LOUISVILLE State KY Zip Code 40299-1948

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245735-70000

Amount of Each Disbursement this Period

1	2	8	.	9
---	---	---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0
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0	0	0
---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. WALGREENS 09005		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 200 E BROADWA		Transaction ID : SB21B-245735-80000
City LOUISVILLE	State KY	
Zip Code 40202-2008	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 12.71
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. JIMMY JOHNS - 2012		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 5105 DIXIE HW		Transaction ID : SB21B-245735-90000
City LOUISVILLE	State KY	
Zip Code 40216	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 6.88
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CHILIS BAR & GRILL #13		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 6641 DIXIE HW		Transaction ID : SB21B-245735-100000
City LOUISVILLE	State KY	
Zip Code 40258	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 16.89
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. BUDGET CREDIT CLUB DEPT.

Mailing Address 300 CENTRE PO

City VIRGINIA BEAC State VA Zip Code 23462-4415

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245735-110000

Amount of Each Disbursement this Period

354.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SPEEDWAY

Mailing Address 500 SPEEDWAY

City ENON State OH Zip Code 45323-1056

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245735-120000

Amount of Each Disbursement this Period

11.99

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DOUBLETREE GUEST SUITES LEXING

Mailing Address 2601 RICHMOND

City LEXINGTON State KY Zip Code 40509-1709

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245735-130000

Amount of Each Disbursement this Period

206.63

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DOUBLETREE GUEST SUITES LEXING

Mailing Address 2601 RICHMOND

City LEXINGTON State KY Zip Code 40509-1709

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245735-140000

Amount of Each Disbursement this Period

180.34

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245736

Amount of Each Disbursement this Period

768.34

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. MCDONALDS OF SWANSEA

Mailing Address 181 JAMES REY

City SWANSEA State MA Zip Code 02777-3416

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245736-10000

Amount of Each Disbursement this Period

6.14

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

768.34

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SUBWAY #29395

Mailing Address 306 CHARLES S

City PROVIDENCE State RI Zip Code 02904-2240

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245736-20000

Amount of Each Disbursement this Period

7.03

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STOP & SHOP 725

Mailing Address 333 W RIVER S

City PROVIDENCE State RI Zip Code 02904-2610

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245736-30000

Amount of Each Disbursement this Period

10.84

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HAMPTON INN & SUITES

Mailing Address 58 WEYBOSSET

City PROVIDENCE State RI Zip Code 02903-2817

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245736-40000

Amount of Each Disbursement this Period

227.27

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DUNKIN DONUTS 339394

Mailing Address 1075 N MAIN S

City PROVIDENCE State RI Zip Code 02904-5718

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245736-50000

Amount of Each Disbursement this Period

2.58

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SUBWAY

Mailing Address 26 MARKET ST

City SWANSEA State MA Zip Code 02777-3914

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245736-60000

Amount of Each Disbursement this Period

5.05

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SANDWICH HUT

Mailing Address 1253 N MAIN S

City PROVIDENCE State RI Zip Code 02904-1826

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245736-70000

Amount of Each Disbursement this Period

8.51

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STOP & SHOP 725

Mailing Address 333 W RIVER S

City PROVIDENCE State RI Zip Code 02904-2610

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245736-80000

Amount of Each Disbursement this Period

18.96

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PROVIDENCE AIRPORT A 9902

Mailing Address 2000 POST RD

City WARWICK State RI Zip Code 02886-1504

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245736-90000

Amount of Each Disbursement this Period

9.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SHELL OIL

Mailing Address ATTN: TEXACO

City HOUSTON State TX Zip Code 77067

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245736-100000

Amount of Each Disbursement this Period

30.60

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FOODLER.COM

Mailing Address 153 TOWNSEND

City State Zip Code
SAN FRANCISCO CA 94107

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245736-110000

Amount of Each Disbursement this Period

20.47

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS 339394

Mailing Address 1075 N MAIN S

City State Zip Code
PROVIDENCE RI 02904-5718

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245736-120000

Amount of Each Disbursement this Period

8.57

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PROVIDENCE BILTMORE HOTEL

Mailing Address 11 DORRANCE S

City State Zip Code
PROVIDENCE RI 02903-1734

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245736-130000

Amount of Each Disbursement this Period

16.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. DUNKIN DONUTS 300244		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1245 N MAIN S		Transaction ID : SB21B-245736-140000
City PROVIDENCE	State RI	
Zip Code 02904-1854	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 5.01
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. HESS/MERIT/CAT 39503		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1215 N MAIN S		Transaction ID : SB21B-245736-150000
City PROVIDENCE	State RI	
Zip Code 02904-1825	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 20.02
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BAR LOUIE PROVIDENCE#1105		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address ONE UNION STA		Transaction ID : SB21B-245736-160000
City PROVIDENCE	State RI	
Zip Code 02903	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 17.98
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. DUNKIN DONUTS 306427		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 2368 GAR HWY		Transaction ID : SB21B-245736-170000
City SWANSEA	State MA	
Zip Code 02777-3322	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 6.31
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ENTERPRISE RENT A CAR		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address PROVIDENCE AP		Transaction ID : SB21B-245736-180000
City WARWICK	State RI	
Zip Code 02886	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 348.00
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address PO Box 360001		Transaction ID : SB21B-245737
City Ft Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 3648.73
Candidate Name	Category/ Type	See Attached Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	3648.73
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HILTON PHOENIX AIRPORT

Mailing Address 2435 S 47TH S

City PHOENIX State AZ Zip Code 85034-6410

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245737-10000

Amount of Each Disbursement this Period

545.93

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SHELL OIL

Mailing Address ATTN: TEXACO

City HOUSTON State TX Zip Code 77067

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245737-20000

Amount of Each Disbursement this Period

29.02

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HILTON GAR INN FLAGSTAFF

Mailing Address 350 W FOREST

City FLAGSTAFF State AZ Zip Code 86001-2918

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245737-30000

Amount of Each Disbursement this Period

303.83

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. HAMPTON INN-SCOTTSDALE		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 10101 N SCOTT		Transaction ID : SB21B-245737-40000
City PARADISE VALL	State AZ	
Zip Code 85253-1422	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 152.77
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CIRCLE K 2709167		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 9709 N HAYDEN		Transaction ID : SB21B-245737-50000
City SCOTTSDALE	State AZ	
Zip Code 85258-1893	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 24.61
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DIAMOND WIRELESS		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address STE 500		Transaction ID : SB21B-245737-60000
City FLAGSTAFF	State AZ	
Zip Code 86001	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 43.20
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. PHILLIPS 66-CONOCO-76 CAT

Mailing Address 411 S KEELER

City BARTLESVILLE State OK Zip Code 74004

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245737-70000

Amount of Each Disbursement this Period

26.47

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DOUBLE TREE BY HILTON FLA

Mailing Address 1175 W ROUTE

City FLAGSTAFF State AZ Zip Code 86001-6213

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245737-80000

Amount of Each Disbursement this Period

506.19

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CHEVRON USA

Mailing Address CHEVRON CARD

City SAN RAMON State CA Zip Code 94583

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245737-90000

Amount of Each Disbursement this Period

38.11

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HILTON PHOENIX AIRPORT

Mailing Address 2435 S 47TH S

City PHOENIX State AZ Zip Code 85034-6410

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245737-100000

Amount of Each Disbursement this Period

2.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HERTZ RAC FIREFLY

Mailing Address CREDIT BILLIN

City OKLAHOMA CITY State OK Zip Code 73134

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245737-110000

Amount of Each Disbursement this Period

613.62

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GLACIER PARK INTNL AIRPRT

Mailing Address 4170 US HIGHW

City KALISPELL State MT Zip Code 59901-6573

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245737-120000

Amount of Each Disbursement this Period

116.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

A. T3 N STARBUCKS #151

Full Name (Last, First, Middle Initial)

Mailing Address 3400 E SKY HA

City PHOENIX State AZ Zip Code 85034-4404

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 18 / 2014

Transaction ID : **SB21B-245737-130000**

Amount of Each Disbursement this Period: 10.98

[MEMO ITEM]
Memo Entry

B. HILTON PHOENIX AIRPORT

Full Name (Last, First, Middle Initial)

Mailing Address 2435 S 47TH S

City PHOENIX State AZ Zip Code 85034-6410

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 18 / 2014

Transaction ID : **SB21B-245737-140000**

Amount of Each Disbursement this Period: 364.20

[MEMO ITEM]
Memo Entry

C. DELTA AIR LINES

Full Name (Last, First, Middle Initial)

Mailing Address DEPT 680 1030

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 18 / 2014

Transaction ID : **SB21B-245737-150000**

Amount of Each Disbursement this Period: 871.80

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245738

Amount of Each Disbursement this Period

2786.87

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. NOODLES & CO 472

Mailing Address 1140 19TH ST

City WASHINGTON State DC Zip Code 20036-6601

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245738-10000

Amount of Each Disbursement this Period

9.44

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FROZENYO

Mailing Address 1900 M ST NW

City WASHINGTON State DC Zip Code 20036-3578

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245738-20000

Amount of Each Disbursement this Period

4.83

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2786.87

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SAFEWAY 4205

Mailing Address 415 14TH ST S

City WASHINGTON State DC Zip Code 20003-3002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245738-30000

Amount of Each Disbursement this Period

8.89

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SAFEWAY 4205

Mailing Address 415 14TH ST S

City WASHINGTON State DC Zip Code 20003-3002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245738-40000

Amount of Each Disbursement this Period

6.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PIZZA HUT #023569

Mailing Address 1990 M ST NW

City WASHINGTON State DC Zip Code 20036-3433

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245738-50000

Amount of Each Disbursement this Period

51.38

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SAFEWAY 4205

Mailing Address 415 14TH ST S

City WASHINGTON State DC Zip Code 20003-3002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245738-60000

Amount of Each Disbursement this Period

7.02

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DC PIZZA

Mailing Address 1103 19TH ST

City WASHINGTON State DC Zip Code 20036-3601

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245738-70000

Amount of Each Disbursement this Period

9.88

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BARREL

Mailing Address 613 PENNSYLVIA

City WASHINGTON State DC Zip Code 20003-4324

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245738-80000

Amount of Each Disbursement this Period

84.30

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ALLIANZ GLOBAL ASSISTANCE

Mailing Address 2805 N PARHAM

City RICHMOND State VA Zip Code 23294-4426

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245738-90000

Amount of Each Disbursement this Period

8.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SAFEWAY 4205

Mailing Address 415 14TH ST S

City WASHINGTON State DC Zip Code 20003-3002

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245738-10000

Amount of Each Disbursement this Period

4.67

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MATCHBOX CAPITOL HILL

Mailing Address 521 8TH ST SE

City WASHINGTON State DC Zip Code 20003-2835

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245738-110000

Amount of Each Disbursement this Period

17.40

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. PRET A MANGER #0026

Mailing Address 1825 I ST NW

City WASHINGTON State DC Zip Code 20006-5411

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245738-120000

Amount of Each Disbursement this Period

18.73

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DOLLAR RAC-ARLINGTON

Mailing Address 2600 JEFFERSON

City ARLINGTON State VA Zip Code 22202-4001

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245738-130000

Amount of Each Disbursement this Period

155.26

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. LA TAXI CO-OP

Mailing Address 2129 W ROSECR

City GARDENA State CA Zip Code 90249-2933

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245738-140000

Amount of Each Disbursement this Period

15.65

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2014

Transaction ID : SB21B-245738-150000

Amount of Each Disbursement this Period

2563.73

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AIRLIE CENTER

Mailing Address 6809 AIRLIE R

City WARRENTON State VA Zip Code 20187-7110

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2014

Transaction ID : SB21B-245738-160000

Amount of Each Disbursement this Period

2365.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2014

Transaction ID : SB21B-245739

Amount of Each Disbursement this Period

2563.73

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2563.73

2563.73

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES INC

Mailing Address AMERICAN AIRL

City TULSA State OK Zip Code 74133-1275

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245739-10000

Amount of Each Disbursement this Period

513.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT

Mailing Address 10 GLENLAKE P

City ATLANTA State GA Zip Code 30328-3495

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245739-20000

Amount of Each Disbursement this Period

9.85

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES E TKT

Mailing Address AMERICAN AIRL

City TULSA State OK Zip Code 74133

Purpose of Disbursement
Travel/Accommodation /Meals

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
12 / 18 / 2014

Transaction ID : SB21B-245739-30000

Amount of Each Disbursement this Period

33.92

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AMTRAK.COM

Mailing Address 60 MASSACHUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245739-40000

Amount of Each Disbursement this Period

307.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245739-50000

Amount of Each Disbursement this Period

24.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PROJECT TACO STORE 2

Mailing Address 6325 WILSHIRE

City LOS ANGELES State CA Zip Code 90048

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245739-60000

Amount of Each Disbursement this Period

11.18

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. INDEPENDENT TAXI OWNERS A

Mailing Address INDEPENDENT T

City LOS ANGELES State CA Zip Code 90029

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245739-70000

Amount of Each Disbursement this Period

70.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245739-80000

Amount of Each Disbursement this Period

85.85

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245739-90000

Amount of Each Disbursement this Period

43.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES E TKT		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address AMERICAN AIRL		Transaction ID : SB21B-245739-130000
City TULSA	State OK	
Zip Code 74133	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 77.81
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. SQUARE		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address STE 600		Transaction ID : SB21B-245739-140000
City SAN FRANCISCO	State CA	
Zip Code 94103	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 23.70
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GLOBAL PRIVATE CAR SERVIC		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 9342 LA SHELL		Transaction ID : SB21B-245739-150000
City TUJUNGA	State CA	
Zip Code 91042	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 90.85
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GOGOAIR

Mailing Address 303 S TECHNOL

City BROOMFIELD State CO Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245739-160000

Amount of Each Disbursement this Period

24.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET S

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245739-170000

Amount of Each Disbursement this Period

11.04

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTEL WILSHIRE

Mailing Address 6317 WILSHIRE

City LOS ANGELES State CA Zip Code 90048

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245739-180000

Amount of Each Disbursement this Period

926.48

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HOTEL WILSHIRE

Mailing Address 6317 WILSHIRE

City LOS ANGELES State CA Zip Code 90048

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245739-190000

Amount of Each Disbursement this Period

55.59

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 7-ELEVEN STORES W GAS

Mailing Address CITY PLACE CE

City DALLAS State TX Zip Code 75204

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245739-200000

Amount of Each Disbursement this Period

18.99

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AJB TAXI MANAGEMENT INC

Mailing Address 662 10TH AVE

City NEW YORK State NY Zip Code 10036-2924

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245739-210000

Amount of Each Disbursement this Period

14.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WAWA 662

Mailing Address 14600 MASON C

City State Zip Code
WOODBIDGE VA 22191-3371

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245740-20000

Amount of Each Disbursement this Period

34.42

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TARGET T0961

Mailing Address 2021 WALNUT S

City State Zip Code
CARY NC 27518-9205

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245740-30000

Amount of Each Disbursement this Period

38.25

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ST LOUIS BREAD 601642

Mailing Address 2234 WALNUT S

City State Zip Code
CARY NC 27511

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245740-40000

Amount of Each Disbursement this Period

10.96

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HUNGRY HOWIE'S 612

Mailing Address 1904 NW MAYNA

City State Zip Code
CARY NC 27513

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245740-50000

Amount of Each Disbursement this Period

34.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SHELL OIL

Mailing Address 12700 NORTHBO

City State Zip Code
HOUSTON TX 77067-2552

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245740-60000

Amount of Each Disbursement this Period

27.21

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HAMPTON INN SUITES

Mailing Address 111 HAMPTON W

City State Zip Code
RALEIGH NC 27607-5062

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245740-70000

Amount of Each Disbursement this Period

452.48

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SUN REFINING & MARKETTING

Mailing Address PO BOX 2301

City State Zip Code
TULSA OK 74102-2301

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245740-80000

Amount of Each Disbursement this Period

32.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. THE GOURMET FACTORY

Mailing Address 37500 EDEN

City State Zip Code
CHAPEL HILL NC 27517-1936

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245740-90000

Amount of Each Disbursement this Period

32.88

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HAMPTON INN SUITES

Mailing Address 111 HAMPTON W

City State Zip Code
RALEIGH NC 27607-5062

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 18 / 2014

Transaction ID : SB21B-245740-100000

Amount of Each Disbursement this Period

125.62

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DIAL CAB CO.

Mailing Address DIAL CAB CO.

City WASHINGTON State DC Zip Code 20018

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245740-110000

Amount of Each Disbursement this Period

13.76

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WWW.ACCESSLINE.COM

Mailing Address 11201 SE 8TH

City BELLEVUE State WA Zip Code 98004-6420

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245740-120000

Amount of Each Disbursement this Period

15.87

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. JRNL SENT CIRC

Mailing Address 333 W STATE S

City MILWAUKEE State WI Zip Code 53203-1305

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2014			

Transaction ID : SB21B-245740-130000

Amount of Each Disbursement this Period

8.62

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. JRNL SENT CIRC

Mailing Address 333 W STATE S

City MILWAUKEE State WI Zip Code 53203-1305

Purpose of Disbursement
Travel/Accommodation /Meals Credit

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245740-140000

Amount of Each Disbursement this Period

-8.05

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HONOLULU STAR-ADVERTISER

Mailing Address 500 ALA MOANA

City HONOLULU State HI Zip Code 96813-4930

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245740-150000

Amount of Each Disbursement this Period

1.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Mileage Credit

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245741

Amount of Each Disbursement this Period

-469.07

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

-469.07

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. EXPEDIA TRAVEL

Mailing Address 10190 COVINGT

City LAS VEGAS State NV Zip Code 89144-7054

Purpose of Disbursement
Mileage Credit

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245741-10000

Amount of Each Disbursement this Period

-469.07

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245743

Amount of Each Disbursement this Period

309.61

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT TRANSACTION

Mailing Address 600 MORGAN FA

City ATLANTA State GA Zip Code 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245743-10000

Amount of Each Disbursement this Period

2.02

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

309.61

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FRATELLOS

Mailing Address 799 UNION AVE

City LACONIA State NH Zip Code 03246-5506

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245743-20000

Amount of Each Disbursement this Period

20.96

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DUNKIN DONUTS 350067

Mailing Address 75 MAIN ST

City DURHAM State NH Zip Code 03824

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245743-30000

Amount of Each Disbursement this Period

2.17

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. OBA TRANSPORTATION - PARK

Mailing Address HOLLOWAY COMM

City DURHAM State NH Zip Code 03824

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245743-40000

Amount of Each Disbursement this Period

2.50

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245743-50000

Amount of Each Disbursement this Period

23.44

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HERTZ RAC FIREFLY

Mailing Address CREDIT BILLIN

City OKLAHOMA CITY State OK Zip Code 73134

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245743-60000

Amount of Each Disbursement this Period

119.91

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SAM ADAMS MEETINGHOUSE PS

Mailing Address 1 AIRPORT RD

City MANCHESTER State NH Zip Code 03103-7450

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245743-70000

Amount of Each Disbursement this Period

15.63

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NEWK'S EATERY

Mailing Address 767 W 23RD ST

City PANAMA CITY State FL Zip Code 32405

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245745-20000

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FIREHOUSE SUBS #172

Mailing Address 668 W 23RD ST

City PANAMA CITY State FL Zip Code 32405-3921

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245745-30000

Amount of Each Disbursement this Period

9.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RETAIL

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245745-40000

Amount of Each Disbursement this Period

8.38

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. PUBLIX 481

Mailing Address 650 W 23RD ST

City PANAMA CITY State FL Zip Code 32405-3921

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245745-50000

Amount of Each Disbursement this Period

26.19

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PUBLIX 481

Mailing Address 650 W 23RD ST

City PANAMA CITY State FL Zip Code 32405-3921

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245745-60000

Amount of Each Disbursement this Period

6.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CANNON OIL 20

Mailing Address 1520 MARTIN L

City PANAMA CITY State FL Zip Code 32405-5428

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245745-70000

Amount of Each Disbursement this Period

34.55

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. BARBERITOS - PANAMA CITY

Mailing Address 836 W 23RD ST

City PANAMA CITY State FL Zip Code 32405

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245745-80000

Amount of Each Disbursement this Period

6.94

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PANERA BREAD 1353

Mailing Address W23RD ST @ST

City PANAMA CITY State FL Zip Code 32405

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245745-90000

Amount of Each Disbursement this Period

13.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NEWK'S EATERY

Mailing Address 767 W 23RD ST

City PANAMA CITY State FL Zip Code 32405

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B-245745-100000

Amount of Each Disbursement this Period

9.63

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. PEPPERS MEXICAN GRILL C		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 2061 N COVE B		Transaction ID : SB21B-245745-110000
City PANAMA CITY	State FL	
Zip Code 32405-5316	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 13.81
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PUBLIX 481		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 650 W 23RD ST		Transaction ID : SB21B-245745-120000
City PANAMA CITY	State FL	
Zip Code 32405-3921	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 11.58
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DELTA AIR LINES		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address DEPT 680 1030		Transaction ID : SB21B-245745-130000
City ATLANTA	State GA	
Zip Code 30354	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 25.00
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. AVIS RENT A CAR CORP		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address SEND ALL MAIL		Transaction ID : SB21B-245745-140000
City GARDEN CITY	State NY	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 744.96
Candidate Name		[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address PO Box 360001		Transaction ID : SB21B-245746
City Fort Lauderdale	State FL	
Purpose of Disbursement Mileage Credit		Amount of Each Disbursement this Period -45.55
Candidate Name		See Attached Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. SUPERSHUTTLE BWI		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address LOWER LEVEL P		Transaction ID : SB21B-245746-10000
City BALTIMORE	State MD	
Purpose of Disbursement Mileage Credit		Amount of Each Disbursement this Period -45.55
Candidate Name		[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	-45.55
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245751

Amount of Each Disbursement this Period

6	2	6	.	7	2
---	---	---	---	---	---

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT

Mailing Address 1307 WALT WHI

City MELVILLE State NY Zip Code 11747-4819

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245751-10000

Amount of Each Disbursement this Period

3	8	.	4	3
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DUNKIN DONUTS 301214

Mailing Address 4 MAIN ST

City MANCHESTER State NH Zip Code 03102-4026

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245751-20000

Amount of Each Disbursement this Period

1	1	.	4	6
---	---	---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6	2	6	.	7	2
---	---	---	---	---	---

6	2	6	.	7	2
---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT TRANSACTION

Mailing Address 600 MORGAN FA

City ATLANTA State GA Zip Code 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245751-30000

Amount of Each Disbursement this Period

7	0	9
---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. RESTAURANT TRANSACTION

Mailing Address 600 MORGAN FA

City ATLANTA State GA Zip Code 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245751-40000

Amount of Each Disbursement this Period

1	4	3	5
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RESTAURANT TRANSACTION

Mailing Address 600 MORGAN FA

City ATLANTA State GA Zip Code 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				18				2014					

Transaction ID : SB21B-245751-50000

Amount of Each Disbursement this Period

9	1	9
---	---	---

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0	0	0
---	---	---

0	0	0
---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ALLEY CAT PIZZERIA

Mailing Address 486 CHESTNUT

City MANCHESTER State NH Zip Code 03101-1614

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245751-60000

Amount of Each Disbursement this Period

21.62

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. NATIONAL CAR RENTAL TOLLS

Mailing Address 66 POWERHOUSE

City ROSLYN HEIGHT State NY Zip Code 11577

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245751-70000

Amount of Each Disbursement this Period

1.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SQUARE

Mailing Address STE 600

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2014

Transaction ID : SB21B-245751-80000

Amount of Each Disbursement this Period

5.88

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. RESTAURANT TRANSACTION

Mailing Address 600 MORGAN FA

City ATLANTA State GA Zip Code 30350-5813

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245751-90000

Amount of Each Disbursement this Period

9.99

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS 13411

Mailing Address 1111 S WILLOW

City MANCHESTER State NH Zip Code 03103-4035

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245751-10000

Amount of Each Disbursement this Period

9.27

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CHIPOTLE 1737

Mailing Address 356 AMHERST S

City NASHUA State NH Zip Code 03063-1211

Purpose of Disbursement
Travel/Accommodation /Meals

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
12			18			2014			

Transaction ID : SB21B-245751-110000

Amount of Each Disbursement this Period

10.07

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. RED ARROW 24 HOUR DINER L

Date of Disbursement: / /

Mailing Address: 61 LOWELL ST

City: MANCHESTER State: NH Zip Code: 03101-1641

Purpose of Disbursement: Travel/Accommodation /Meals

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID : **SB21B-245751-120000**

Amount of Each Disbursement this Period:

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
B. WENDY'S

Date of Disbursement: / /

Mailing Address: 675 S WILLOW

City: MANCHESTER State: NH Zip Code: 03103

Purpose of Disbursement: Travel/Accommodation /Meals

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID : **SB21B-245751-130000**

Amount of Each Disbursement this Period:

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
C. RESTAURANT TRANSACTION

Date of Disbursement: / /

Mailing Address: 600 MORGAN FA

City: ATLANTA State: GA Zip Code: 30350-5813

Purpose of Disbursement: Travel/Accommodation /Meals

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID : **SB21B-245751-140000**

Amount of Each Disbursement this Period:

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. SOMERSET PLAZA FSU 03414		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 379 AMHERST S		Transaction ID : SB21B-245751-150000
City NASHUA State NH Zip Code 03063	Amount of Each Disbursement this Period 14.68	
Purpose of Disbursement Travel/Accommodation /Meals	Category/ Type	[MEMO ITEM] Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. EXXONMOBIL CAT OUTSIDE		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address CUST SVC 1 80		Transaction ID : SB21B-245751-160000
City KANSAS CITY State MO Zip Code 64141	Amount of Each Disbursement this Period 37.50	
Purpose of Disbursement Travel/Accommodation /Meals	Category/ Type	[MEMO ITEM] Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. UNION TAXI CAB COOPERATIV		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 6019 TOWER CT		Transaction ID : SB21B-245751-170000
City ALEXANDRIA State VA Zip Code 22304-3201	Amount of Each Disbursement this Period 30.36	
Purpose of Disbursement Travel/Accommodation /Meals	Category/ Type	[MEMO ITEM] Memo Entry
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jonathan Parker		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1611 Hobart Street NW		Transaction ID : SB21B-245754
City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period 9466.48	
Purpose of Disbursement Salaries	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Jonathan Parker		Date of Disbursement MM / DD / YYYY 12 / 18 / 2014
Mailing Address 1611 Hobart Street NW		Transaction ID : SB21B-245755
City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period 9466.48	
Purpose of Disbursement Salaries	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement MM / DD / YYYY 12 / 19 / 2014
Mailing Address P.O. BOX 842854		Transaction ID : SB21B-245837
City Boston State MA Zip Code 02284	Amount of Each Disbursement this Period 445.47	
Purpose of Disbursement Payroll Service	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	19378.43
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Blackbaud Merchant Services

Mailing Address 2000 Daniel Island Drive

City Charleston State SC Zip Code 29492

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2014

Transaction ID : SB21B-245840

Amount of Each Disbursement this Period

148.60

Full Name (Last, First, Middle Initial)

B. Discovery Benefits, Inc.

Mailing Address 3216 13th Avenue South

City Fargo State ND Zip Code 58103

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 26 / 2014

Transaction ID : SB21B-245847

Amount of Each Disbursement this Period

705.37

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address P.O. BOX 842854

City Boston State MA Zip Code 02284

Purpose of Disbursement
Payroll Service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 26 / 2014

Transaction ID : SB21B-245838

Amount of Each Disbursement this Period

401.53

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1255.50

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Discovery Benefits, Inc.

Mailing Address 3216 13th Avenue South

City Fargo State ND Zip Code 58103

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 26 / 2014

Transaction ID : SB21B-245845

Amount of Each Disbursement this Period

57.75

B. Blackbaud Merchant Services

Full Name (Last, First, Middle Initial)

Mailing Address 2000 Daniel Island Drive

City Charleston State SC Zip Code 29492

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 30 / 2014

Transaction ID : SB21B-245841

Amount of Each Disbursement this Period

62.37

C. Bank of America ATTN: Scranton Standby

Full Name (Last, First, Middle Initial)

Mailing Address Trade Operations PA6-580-02-30
1 Fleet Way

City Scranton State PA Zip Code 18507

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 30 / 2014

Transaction ID : SB21B-245843

Amount of Each Disbursement this Period

947.92

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1068.04

**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)
EMILY's List

A. John Hancock c/o City Bank Delaware

Full Name (Last, First, Middle Initial)

Mailing Address 1615 Brett Road Lock Box 7122

City New Castle State DE Zip Code 19720

Purpose of Disbursement Employment Pension/ 401(k)

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2014

Transaction ID : **SB21B-245857**

Amount of Each Disbursement this Period: 52534.05

Category/Type

B. Ellen R Malcolm

Full Name (Last, First, Middle Initial)

Mailing Address 5060 Linnean Avenue, NW

City Washington, State DC Zip Code 20008

Purpose of Disbursement Insurance Health/Life

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2014

Transaction ID : **SB21B-245850**

Amount of Each Disbursement this Period: 555.90

Category/Type

C. Paypal

Full Name (Last, First, Middle Initial)

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement Credit Card Service Charges

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2014

Transaction ID : **SB21B-245849**

Amount of Each Disbursement this Period: 453.75

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 53543.70

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address P.O. BOX 842854

City Boston State MA Zip Code 02284

Purpose of Disbursement
Taxes - Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245956

Amount of Each Disbursement this Period

92264.96

Full Name (Last, First, Middle Initial)

B. Jane Beard

Mailing Address 614 Kenyon Street NW

City Washington State DC Zip Code 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245859

Amount of Each Disbursement this Period

1629.38

Full Name (Last, First, Middle Initial)

C. Liana Eisman

Mailing Address 2801 Connecticut Ave NW
Apt 13

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245860

Amount of Each Disbursement this Period

1321.72

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

95216.06

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Ellen R Malcolm

Mailing Address 5060 Linnean Avenue, NW

City Washington, State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SB21B-245861

Amount of Each Disbursement this Period

992.15

Full Name (Last, First, Middle Initial)

B. Jessica O'Connell

Mailing Address 1524 D Street SE

City Washington, State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SB21B-245862

Amount of Each Disbursement this Period

5465.49

Full Name (Last, First, Middle Initial)

C. Stephanie Schriock

Mailing Address 3225 Valley Drive

City Alexandria, State VA Zip Code 22302

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SB21B-245863

Amount of Each Disbursement this Period

7687.72

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

14145.36

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Erica Best

Mailing Address 221 Seaton Place, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245864

Amount of Each Disbursement this Period

1340.70

Full Name (Last, First, Middle Initial)

B. Arnetia Fogg

Mailing Address 1000 Mandarin Drive

City Upper Marlboro State MD Zip Code 20774

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245865

Amount of Each Disbursement this Period

1001.91

Full Name (Last, First, Middle Initial)

C. Eun Young Park

Mailing Address 1600 S. Eads Street
Apt 1205N

City Arlington State VA Zip Code 22202

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245866

Amount of Each Disbursement this Period

1019.87

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3362.48

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Camille Sanders

Mailing Address 1103 Glen Willow Drive
#13

City Capitol Heights State MD Zip Code 20743

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SB21B-245867

Amount of Each Disbursement this Period

1725.31

Full Name (Last, First, Middle Initial)

B. Melanie Smith

Mailing Address 2100 Connecticut Ave, NW
Apartment 609

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SB21B-245868

Amount of Each Disbursement this Period

1472.08

Full Name (Last, First, Middle Initial)

C. Lauren Williams

Mailing Address 3261 Pony Ridge Way

City Oakton State VA Zip Code 22124

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SB21B-245869

Amount of Each Disbursement this Period

765.43

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3962.82

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Alyssa Barnum

Mailing Address 3500 13th Street NW
#208

City Washington State DC Zip Code 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SB21B-245870

Amount of Each Disbursement this Period

2647.25

Full Name (Last, First, Middle Initial)

B. Emily Beardsley

Mailing Address 1451 Park Road NW
#313

City Washington State DC Zip Code 20036

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SB21B-245871

Amount of Each Disbursement this Period

1514.42

Full Name (Last, First, Middle Initial)

C. Lizzie Cooper

Mailing Address 945 Route 35

City Cross River State NY Zip Code 10518

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2014

Transaction ID : SB21B-245872

Amount of Each Disbursement this Period

2939.26

SUBTOTAL of Disbursements This Page (optional)..... ▶

7100.93

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Louisa Whitney		Date of Disbursement MM / DD / YYYY 12 / 31 / 2014
Mailing Address 1701 16th Street NW Apartment 721		Transaction ID : SB21B-245873
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 4269.19
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Allison Frederick		Date of Disbursement MM / DD / YYYY 12 / 31 / 2014
Mailing Address 3915 Cameron St Apt 107		Transaction ID : SB21B-245874
City Dumfries	State VA	
Zip Code 22026	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 1157.31
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Anna Lidman		Date of Disbursement MM / DD / YYYY 12 / 31 / 2014
Mailing Address 37 Brookview Terrace		Transaction ID : SB21B-245875
City Portland	State ME	
Zip Code 04102	Purpose of Disbursement Salaries	Amount of Each Disbursement this Period 3446.46
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	8872.96
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Michelle Ortiz

Mailing Address 2801 Turk Blvd #306

City San Francisco State CA Zip Code 94118

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245876

Amount of Each Disbursement this Period

2827.18

Full Name (Last, First, Middle Initial)

B. Andrea Pagano Reyes

Mailing Address 4501 Connecticut Ave, NW #723

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245877

Amount of Each Disbursement this Period

2584.30

Full Name (Last, First, Middle Initial)

C. Pat Reyes

Mailing Address 2601 Glenview Rd

City Glenview State IL Zip Code 60025

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245878

Amount of Each Disbursement this Period

3319.50

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8730.98

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Laura Rose Wilson		Date of Disbursement MM / DD / YYYY 12 / 31 / 2014
Mailing Address 8100 N. Madrone Trail		Transaction ID : SB21B-245879
City Austin State TX Zip Code 78737	Amount of Each Disbursement this Period 2316.15	
Purpose of Disbursement Salaries	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Marissa Strickfaden		Date of Disbursement MM / DD / YYYY 12 / 31 / 2014
Mailing Address 1100 First Street, SE Apt 511		Transaction ID : SB21B-245880
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 1628.49	
Purpose of Disbursement Salaries	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Hannah Truslow		Date of Disbursement MM / DD / YYYY 12 / 31 / 2014
Mailing Address 809 6th Street NW Apt. 52		Transaction ID : SB21B-245881
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 1280.48	
Purpose of Disbursement Salaries	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	5225.12
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Kristin White

Mailing Address 9020 Mountain Valley Road

City Fairfax State VA Zip Code 22039

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : SB21B-245882

Amount of Each Disbursement this Period

998.19

Full Name (Last, First, Middle Initial)

B. Kelsey Colon

Mailing Address 450 Taylor Street NE
Apt F11

City Washington State DC Zip Code 20017

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : SB21B-245883

Amount of Each Disbursement this Period

1331.67

Full Name (Last, First, Middle Initial)

C. Robert Courtney

Mailing Address 1619 Swan Street NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : SB21B-245884

Amount of Each Disbursement this Period

1772.64

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4102.50

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Alyssa Franke

Mailing Address 4012 47th Street NW
Apt 4

City Washington State DC Zip Code 20016

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245885

Amount of Each Disbursement this Period

1055.97

Full Name (Last, First, Middle Initial)

B. Malinda Frevert

Mailing Address 769 Mohawk St.

City Columbus State OH Zip Code 43206

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245886

Amount of Each Disbursement this Period

1973.26

Full Name (Last, First, Middle Initial)

C. Jane Hughes

Mailing Address 1028 31st Street NW

City Washington State DC Zip Code 20007

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245887

Amount of Each Disbursement this Period

1725.57

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4754.80

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jenna Lowenstein

Mailing Address 389 Rhode Island Ave NW
Apt 6

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245929

Amount of Each Disbursement this Period

3219.63

Full Name (Last, First, Middle Initial)

B. Priyanka Mantha

Mailing Address 3314 Mt. Pleasant St NW
Apt 37

City Washington State DC Zip Code 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245888

Amount of Each Disbursement this Period

1271.54

Full Name (Last, First, Middle Initial)

C. Jessica McIntosh

Mailing Address 1700 Kalorama Road
#404

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245889

Amount of Each Disbursement this Period

2635.98

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7127.15

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Alison McQuade

Mailing Address 320 23rd Street South
#1526

City Arlington State VA Zip Code 22202

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245890

Amount of Each Disbursement this Period

1862.74

Full Name (Last, First, Middle Initial)

B. Jennifer Medeiros

Mailing Address 2929 Connecticut Ave. NW
Apt 508

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245891

Amount of Each Disbursement this Period

1065.89

Full Name (Last, First, Middle Initial)

C. Sarah Pierz

Mailing Address 925 25th St NW
Apt 316

City Washington State DC Zip Code 20037

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245892

Amount of Each Disbursement this Period

1340.43

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4269.06

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Marciann Stech

Mailing Address 2026 16th Street, NW
Apt 3

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245893

Amount of Each Disbursement this Period

1982.94

Full Name (Last, First, Middle Initial)

B. Jessica Byrd

Mailing Address 626 S Street NW
Apt 303

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245894

Amount of Each Disbursement this Period

1802.97

Full Name (Last, First, Middle Initial)

C. Sreyashe Dhar

Mailing Address 14 16th Street SW

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245895

Amount of Each Disbursement this Period

1190.24

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4976.15

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Xakota Espinoza

Mailing Address 1119 Euclid Street NW

City Washington State DC Zip Code 20009

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245896

Amount of Each Disbursement this Period

1041.21

Full Name (Last, First, Middle Initial)

B. Denise Feriozzi

Mailing Address 1363 E Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245897

Amount of Each Disbursement this Period

4202.59

Full Name (Last, First, Middle Initial)

C. Lucinda Guinn

Mailing Address 1425 11th Street NW #104

City Washington State DC Zip Code 20001

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245898

Amount of Each Disbursement this Period

2600.81

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7844.61

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Heather Kashner

Mailing Address 13 Salmon Run

City Camden State ME Zip Code 04843

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : SB21B-245899

Amount of Each Disbursement this Period

3	1	7	1	8	3
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Ashely Lough

Mailing Address 326 F Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : SB21B-245927

Amount of Each Disbursement this Period

3	0	4	8	4	2
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Michele McGrorty

Mailing Address 4704 Gordon Avenue

City Monona State WI Zip Code 53716

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : SB21B-245900

Amount of Each Disbursement this Period

1	0	7	4	3	3
---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7	2	9	4	5	8
---	---	---	---	---	---

0	0	0	0	0	0
---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Heather Owens

Mailing Address 114 Colonial Avenue

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245928

Amount of Each Disbursement this Period

3595.14

Full Name (Last, First, Middle Initial)

B. Tori Taylor

Mailing Address 470 Taylor Street, NE
Apt H-22

City Washington State DC Zip Code 20017

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245901

Amount of Each Disbursement this Period

1217.80

Full Name (Last, First, Middle Initial)

C. Daniella Urbina

Mailing Address 103 G Street, SW
Apt. 219B

City Washington State DC Zip Code 20024

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245902

Amount of Each Disbursement this Period

2496.29

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7309.23

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Muthoni Wambu

Mailing Address 1215 Dexter Ave N
Apt 636

City Seattle State WA Zip Code 98109

Purpose of Disbursement
Salaries

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
12			31			2014			

Transaction ID : SB21B-245903

Amount of Each Disbursement this Period

3084.53

Full Name (Last, First, Middle Initial)

B. Catherine Loeffelman

Mailing Address 1811 Wyoming Ave. NW.
Apt 1

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

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
12			31			2014			

Transaction ID : SB21B-245904

Amount of Each Disbursement this Period

2581.22

Full Name (Last, First, Middle Initial)

C. William Rusche

Mailing Address 300 Mass Ave NW Apt 34

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

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
12			31			2014			

Transaction ID : SB21B-245905

Amount of Each Disbursement this Period

974.56

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6640.31

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Eric Smith

Mailing Address 130 M Street NE Apt 413

City Washington State DC Zip Code 20002

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245906

Amount of Each Disbursement this Period

1814.71

Full Name (Last, First, Middle Initial)

B. Emily Campbell

Mailing Address 554 Halloran Springs Road

City Las Vegas State NV Zip Code 89148

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245907

Amount of Each Disbursement this Period

2928.67

Full Name (Last, First, Middle Initial)

C. Natalie Cone

Mailing Address 6515 Belcrest Road
Apartment 1608B

City Hyattsville State MD Zip Code 20782

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245908

Amount of Each Disbursement this Period

983.06

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5726.44

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Garrick Delzell

Mailing Address 415 Oak Grove St, #521

City Minneapolis State MN Zip Code 55403

Purpose of Disbursement
Salaries

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
12			31			2014			

Transaction ID : SB21B-245909

Amount of Each Disbursement this Period

2624.29

Full Name (Last, First, Middle Initial)

B. Peggy Egan

Mailing Address 20518 East Shore, Hwy 35

City Bigfork State MT Zip Code 59911

Purpose of Disbursement
Salaries

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
12			31			2014			

Transaction ID : SB21B-245910

Amount of Each Disbursement this Period

2618.83

Full Name (Last, First, Middle Initial)

C. Alex Glass

Mailing Address 1412 15th Street NW
#5

City Washington State DC Zip Code 20005

Purpose of Disbursement
Salaries

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
12			31			2014			

Transaction ID : SB21B-245911

Amount of Each Disbursement this Period

2440.35

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7683.47

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Hillary Nachem

Mailing Address 1216 D Street SE #2

City Washington State DC Zip Code 20003

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245912

Amount of Each Disbursement this Period

2147.10

Full Name (Last, First, Middle Initial)

B. Samuel Nitz

Mailing Address 1200 N Street, NW #608

City Washington State DC Zip Code 20005

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245913

Amount of Each Disbursement this Period

2067.50

Full Name (Last, First, Middle Initial)

C. Jonathan Parker

Mailing Address 1611 Hobart Street NW

City Washington State DC Zip Code 20009

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245914

Amount of Each Disbursement this Period

4576.80

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8791.40

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jessica Post

Mailing Address 355 I Street, SW
#S620

City Washington State DC Zip Code 20024

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245915

Amount of Each Disbursement this Period

2649.96

Full Name (Last, First, Middle Initial)

B. Devin Rankin

Mailing Address 2112 O Street, NW
#3

City Washington State DC Zip Code 20037

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245916

Amount of Each Disbursement this Period

2338.46

Full Name (Last, First, Middle Initial)

C. Mary Jane Volk

Mailing Address 541 E. Nelson Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245917

Amount of Each Disbursement this Period

3390.06

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8378.48

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SaBrina Brown

Mailing Address 3730 5th St.

City North Beach State MD Zip Code 20714

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245918

Amount of Each Disbursement this Period

3799.43

Full Name (Last, First, Middle Initial)

B. Lesbia Cajchun

Mailing Address 2902 Kings Chapel Rd, #7

City Falls Church State VA Zip Code 22042

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245919

Amount of Each Disbursement this Period

2124.60

Full Name (Last, First, Middle Initial)

C. Caroline Fines

Mailing Address 10621 Regent Park Court

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245920

Amount of Each Disbursement this Period

2523.77

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8447.80

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Sarah Hasenfuss

Mailing Address 1 Scott Circle NW
Apt 414

City Washington State DC Zip Code 20036

Purpose of Disbursement
Salaries

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
12			31			2014			

Transaction ID : SB21B-245921

Amount of Each Disbursement this Period

1031.21

Full Name (Last, First, Middle Initial)

B. Ray Keating

Mailing Address 816 Lucky Rd

City Severn State MD Zip Code 21144

Purpose of Disbursement
Salaries

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
12			31			2014			

Transaction ID : SB21B-245922

Amount of Each Disbursement this Period

2393.87

Full Name (Last, First, Middle Initial)

C. Victoria Kempter

Mailing Address 4306 Alton PI NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
Salaries

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
12			31			2014			

Transaction ID : SB21B-245923

Amount of Each Disbursement this Period

1216.18

SUBTOTAL of Disbursements This Page (optional)..... ▶

4641.26

TOTAL This Period (last page this line number only)..... ▶

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**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Sanskruti Majmudar

Mailing Address 3754 McKinley Street NW

City Washington State DC Zip Code 20015

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245924

Amount of Each Disbursement this Period

1091.14

Full Name (Last, First, Middle Initial)

B. Leigh Warren

Mailing Address 3023 S Columbus St

City Arlington State VA Zip Code 22206

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245925

Amount of Each Disbursement this Period

3157.38

Full Name (Last, First, Middle Initial)

C. Kate Watts

Mailing Address 1425 4th Street, SW Apt. A217

City Washington State DC Zip Code 20024

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B-245926

Amount of Each Disbursement this Period

1181.35

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5429.87

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245835

Amount of Each Disbursement this Period

47.85

Full Name (Last, First, Middle Initial)

B. Jeanne Duncan

Mailing Address 1633 NE Going Street

City Portland State OR Zip Code 97211

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245851

Amount of Each Disbursement this Period

7000.00

Full Name (Last, First, Middle Initial)

C. Jennifer Treat Fundraising Ink

Mailing Address 3250 Tennyson St NW

City Washington State DC Zip Code 20015

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B-245852

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10047.85

1835216.16

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Brenda Lawrence Contributions

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2014

Mailing Address Jane Foote
40503 Village Wood Rd

Transaction ID : 20149661

City Novi State MI Zip Code 48375

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
Candidate Contrib Earmarked

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 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)..... ▶

50.00

TOTAL This Period (last page this line number only)..... ▶

50.00

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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Pearl Shuman

Mailing Address 7406 Spring Village Dr Apt 106

City Springfield State VA Zip Code 22150

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB28A-245626

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Jerry Broussard

Mailing Address 11324 Peggy St.

City Saint Amant State LA Zip Code 70774

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB28A-245629

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

C. Leland Ehling

Mailing Address 800 Euclid Ave

City Berkeley State CA Zip Code 94708

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB28A-245627

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

80.00

TOTAL This Period (last page this line number only)..... ▶

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**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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Josephy Langhofer

Mailing Address 9026 Cottonwood St., Apt. 1

City Lenexa State KS Zip Code 66215

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB28A-245628

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Lawrence E Miller

Mailing Address 136 Allen St

City Arroyo Grande State CA Zip Code 93420

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

Transaction ID : SB28A-245941

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. Geralt Schatz

Mailing Address 19 Shelly Ln

City Fort Washington State PA Zip Code 19034

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2014

Transaction ID : SB28A-245937

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

275.00

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**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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Nanette Cooper-McGuinness		Date of Disbursement MM / DD / YYYY 12 / 03 / 2014
Mailing Address 1048 Alvarado Rd		Transaction ID : SB28A-245951
City Berkeley	State CA	
Zip Code 94705	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 20.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Genevieve Wyner		Date of Disbursement MM / DD / YYYY 12 / 04 / 2014
Mailing Address 20 Rowes Wharf Apt 507		Transaction ID : SB28A-245971
City Boston	State MA	
Zip Code 02110	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 50.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Linda Turner		Date of Disbursement MM / DD / YYYY 12 / 05 / 2014
Mailing Address 1330 Quail Hollow Rd		Transaction ID : SB28A-245972
City Ben Lomond	State CA	
Zip Code 95005	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 50.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	120.00
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)

<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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Genevieve Wyner		Date of Disbursement MM / DD / YYYY 12 / 08 / 2014
Mailing Address 20 Rowes Wharf Apt 507		Transaction ID : SB28A-245936
City Boston	State MA	
Zip Code 02110	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 400.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Beth Shagene		Date of Disbursement MM / DD / YYYY 12 / 09 / 2014
Mailing Address 4845 Florida Ave SW		Transaction ID : SB28A-245932
City Wyoming	State MI	
Zip Code 49548	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 8.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Paul Vanlinden Tol		Date of Disbursement MM / DD / YYYY 12 / 09 / 2014
Mailing Address 890 E 7th St Apt BR		Transaction ID : SB28A-245953
City Brooklyn	State NY	
Zip Code 11230	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 25.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	433.00
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)

<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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kim Lee Winslow		Date of Disbursement MM / DD / YYYY 12 / 09 / 2014
Mailing Address 2420 27th St Apt 3A		Transaction ID : SB28A-245948
City Astoria	State NY	
Zip Code 11102	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 25.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Rosie Harsch		Date of Disbursement MM / DD / YYYY 12 / 09 / 2014
Mailing Address 8635 W Sahara #656		Transaction ID : SB28A-245955
City Las Vegas	State NV	
Zip Code 89117	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 20.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Elizabeth Kwok		Date of Disbursement MM / DD / YYYY 12 / 10 / 2014
Mailing Address 3845 Harrison St Apt 314		Transaction ID : SB28A-245935
City Oakland	State CA	
Zip Code 94611	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 25.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶	70.00
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)

<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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Melvin Olney

Mailing Address 5068 Taylor Creek Dr

City Jacksonville State FL Zip Code 32258

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A-245950

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Mary Stahl

Mailing Address 1493 Capri Ave

City Petaluma State CA Zip Code 94954

Purpose of Disbursement
Void Check

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A-245623

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Caroline Bergh

Mailing Address 501 Portola Rd
Apt 8080

City Portola Valley State CA Zip Code 94028

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A-245525

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Vici Dehaan

Mailing Address 645 Emporia Rd

City Boulder State CO Zip Code 80305

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A-245944

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Priscilla Gilman

Mailing Address 4537 Deer Run

City Evans State GA Zip Code 30809

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A-245942

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Camilla Auger

Mailing Address 709 N Spruce St

City Aspen State CO Zip Code 81611

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A-245933

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Geraldine Maslanka

Mailing Address 201 W 89th St
Apt #15G

City New York State NY Zip Code 10024

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB28A-245938

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Olivia Fox

Mailing Address 125 Beach 17th St

City Far Rockaway State NY Zip Code 11691

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB28A-245952

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Darlene Abbott Kordonwy

Mailing Address 15088 Siverston Rd NE

City Bainbridge Island State WA Zip Code 98110

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB28A-245934

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Greg Ryan		Date of Disbursement MM / DD / YYYY 12 / 19 / 2014
Mailing Address 5930 Oakdale Ave		Transaction ID : SB28A-245945
City Woodland Hills	State CA	
Zip Code 91367	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 20.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Barbara J. Rolph		Date of Disbursement MM / DD / YYYY 12 / 22 / 2014
Mailing Address 256 Sycamore Ave		Transaction ID : SB28A-245931
City Mill Valley	State CA	
Zip Code 94941	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 18.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Judith Eisenbach		Date of Disbursement MM / DD / YYYY 12 / 22 / 2014
Mailing Address 330 W 28th St 19-C		Transaction ID : SB28A-245947
City New York	State NY	
Zip Code 10001	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 25.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	63.00
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)

<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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jack Schwalbe		Date of Disbursement MM / DD / YYYY 12 / 22 / 2014
Mailing Address 4505 Lake Waterford Way Apt 5		Transaction ID : SB28A-245959
City Melbourne	State FL Zip Code 32901	
Purpose of Disbursement Refund	Candidate Name	Amount of Each Disbursement this Period 30.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Leslie Conner-Maiyo		Date of Disbursement MM / DD / YYYY 12 / 22 / 2014
Mailing Address PO Box 673		Transaction ID : SB28A-245949
City Salmon	State ID Zip Code 83467	
Purpose of Disbursement Refund	Candidate Name	Amount of Each Disbursement this Period 35.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jennie Dickerson		Date of Disbursement MM / DD / YYYY 12 / 24 / 2014
Mailing Address 10989 S Church St		Transaction ID : SB28A-245939
City Chicago	State IL Zip Code 60643	
Purpose of Disbursement Refund	Candidate Name	Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	90.00
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)

<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 checked="" 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Robert Mayer

Mailing Address 132 Fox Run Rd

City New Canaan State CT Zip Code 06840

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB28A-245954

Amount of Each Disbursement this Period

B. Susan Love

Full Name (Last, First, Middle Initial)

Mailing Address 6950 Gunn Dr

City Oakland State CA Zip Code 94612

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB28A-245943

Amount of Each Disbursement this Period

C. Joanne Ono

Full Name (Last, First, Middle Initial)

Mailing Address 1199 Aschauer Ct

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB28A-245940

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Women and Politics Institute, American University

Mailing Address 4400 Massachusetts Ave, NW #235

City Washington State DC Zip Code 20016

Purpose of Disbursement
Charitable Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB29-245621

Amount of Each Disbursement this Period

1300.00

Full Name (Last, First, Middle Initial)

B. Friends of Sandra Williams

Mailing Address 12518 Fairhill Road

City Cleveland State OH Zip Code 44120

Purpose of Disbursement
Void Check

Candidate Name

Friends of Sandra Williams

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB29-245957

Amount of Each Disbursement this Period

-1000.00

State Senate OH-21

Full Name (Last, First, Middle Initial)

C. Friends of Susan C. Lee

Mailing Address 9600 Alta Vista Terrace

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Void Check

Candidate Name

Friends of Susan C. Lee

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB29-245958

Amount of Each Disbursement this Period

-500.00

State Senate MD-16

SUBTOTAL of Disbursements This Page (optional)..... ▶

-200.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Ricks For Regent

Mailing Address 4352 S. Billings Circle

City Aurora State CO Zip Code 80015

Purpose of Disbursement
Void Check

Candidate Name
Ricks For Regent

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB29-245960

Amount of Each Disbursement this Period

State Regent-CO

Full Name (Last, First, Middle Initial)

B. Judy Solano for Colorado Senate

Mailing Address PO Box 994

City Brighton State CO Zip Code 80602

Purpose of Disbursement
Void Check

Candidate Name
Judy Solano for Colorado Senate

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB29-245961

Amount of Each Disbursement this Period

State Senate CO-24

Full Name (Last, First, Middle Initial)

C. Daisy Baez for State Representative

Mailing Address PO Box 141642

City Coral Gables State FL Zip Code 33114

Purpose of Disbursement
Void Check

Candidate Name
Daisy Baez for State Representative

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB29-245962

Amount of Each Disbursement this Period

State House FL-114

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Susan Criss Campaign

Mailing Address PO Box 17046

City Galveston State TX Zip Code 77552

Purpose of Disbursement
Void Check

Candidate Name
Susan Criss Campaign

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : SB29-245963

Amount of Each Disbursement this Period

-2000.00

State House TX-23

Full Name (Last, First, Middle Initial)

B. Vonnie Brown for SD11

Mailing Address PO Box 1107

City Great Falls State MT Zip Code 59403

Purpose of Disbursement
Void Check

Candidate Name
Vonnie Brown for SD11

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : SB29-245964

Amount of Each Disbursement this Period

-160.00

State Senate MT-11

Full Name (Last, First, Middle Initial)

C. Dunwell for House District 84

Mailing Address PO Box 4656

City Helena State MT Zip Code 59601

Purpose of Disbursement
Void Check

Candidate Name
Dunwell for House District 84

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : SB29-245965

Amount of Each Disbursement this Period

-160.00

State House MT-84

SUBTOTAL of Disbursements This Page (optional)..... ▶

-2320.00

TOTAL This Period (last page this line number only)..... ▶

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Funk for Montana

Mailing Address PO Box 925

City Helena State MT Zip Code 59624

Purpose of Disbursement
Void Check

Candidate Name

Funk for Montana

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2014

Transaction ID : SB29-245966

Amount of Each Disbursement this Period

-160.00

State House MT-82

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

-160.00

-4080.00

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS

NAME OF COMMITTEE (In Full)
EMILY's List

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER Fundraising/PSP 2014 ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported Transaction ID : H2-EL-1823	FEDERAL % <input style="width: 100px; text-align: center;" type="text" value="50.00"/> %	NONFEDERAL % <input style="width: 100px; text-align: center;" type="text" value="50.00"/> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <input style="width: 100px; text-align: center;" type="text"/> %	NONFEDERAL % <input style="width: 100px; text-align: center;" type="text"/> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <input style="width: 100px; text-align: center;" type="text"/> %	NONFEDERAL % <input style="width: 100px; text-align: center;" type="text"/> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <input style="width: 100px; text-align: center;" type="text"/> %	NONFEDERAL % <input style="width: 100px; text-align: center;" type="text"/> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <input style="width: 100px; text-align: center;" type="text"/> %	NONFEDERAL % <input style="width: 100px; text-align: center;" type="text"/> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <input style="width: 100px; text-align: center;" type="text"/> %	NONFEDERAL % <input style="width: 100px; text-align: center;" type="text"/> %

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Bank of America-NF#3	MM / DD / YYYY 12 / 11 / 2014	38442.77

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	0.00
Transaction ID : H3-EL-1824	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) PSP	38442.77
Transaction ID : H3-EL-1825	
b)	
c) Total Amount Transferred For Direct Fundraising	38442.77
v) Direct Candidate Support (List Activity or Event Identifier)	
a)	
b)	
c) Total Amount Transferred For Direct Candidate Support	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 EMILY's List

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Merrill Lynch-NF#4	MM / DD / YYYY 12 / 18 / 2014	800000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	800000.00
Transaction ID : H3-EL-1826	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	800000.00
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	38442.77
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred).....	838442.77

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Capital Strategies Mailing Address 14000 Old Harbor Lane #302 City Marina Del Rey State CA Zip Code 90292 Purpose of Disbursement: Consulting Fundraising Activity or Event Identifier: PSP14		Transaction ID : H4-245298 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1385028.09 Date 11 / 25 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 3750.00 + 3750.00 = 7500.00		Category/Type

B. Full Name (Last, First, Middle Initial) Federal Express Mailing Address P. O. Box 371461 City Pittsburg State PA Zip Code 15250-7461 Purpose of Disbursement: Deliveries Activity or Event Identifier: PSP14		Transaction ID : H4-245308 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1385067.59 Date 11 / 25 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 19.75 + 19.75 = 39.50		Category/Type

C. Full Name (Last, First, Middle Initial) Anna Lidman Mailing Address 37 Brookview Terrace City Portland State ME Zip Code 04102 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: PSP14		Transaction ID : H4-245310 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1385087.59 Date 11 / 25 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 10.00 + 10.00 = 20.00		Category/Type

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3779.75		3779.75		7559.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245315 Project Design Company		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 641 S Street, NW 4th Fl		Allocated Activity or Event Year-To-Date 1385867.59	
City Washington State DC Zip Code 20001	Category/ Type	Date 11 / 25 / 2014	
Purpose of Disbursement: Design/Graphics Activity or Event Identifier: PSP14		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 390.00 + 390.00 = 780.00	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245321 United Parcel Service		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 7247-0244		Allocated Activity or Event Year-To-Date 1385925.86	
City Philadelphia State PA Zip Code 19170-0001	Category/ Type	Date 11 / 25 / 2014	
Purpose of Disbursement: Deliveries Activity or Event Identifier: PSP14		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 29.13 + 29.14 = 58.27	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245332 American Express		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001		Allocated Activity or Event Year-To-Date 1397724.43	
City Fort Lauderdale State FL Zip Code 33336	Category/ Type	Date 11 / 25 / 2014	
Purpose of Disbursement: Catering/Facilities Activity or Event Identifier: PSP14 See Attached Memo Entry		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 5899.28 + 5899.29 = 11798.57	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6318.41		6318.43		12636.84

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) HOTEL ICON AUTO COL		Transaction ID : H4-245332-10000		Allocated Activity or Event:	
Mailing Address 220 MAIN ST				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City HOUSTON State TX Zip Code 77002-1706				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Catering/Facilities				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
2203.11		2203.11		4406.22	

B. Full Name (Last, First, Middle Initial) THE HOUSTON CLUB # 2604		Transaction ID : H4-245332-20000		Allocated Activity or Event:	
Mailing Address SUITE 4900				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City HOUSTON State TX Zip Code 77002				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Catering/Facilities				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
3696.17		3696.18		7392.35	

C. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245333		Allocated Activity or Event:	
Mailing Address PO Box 360001				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Fort Lauderdale State FL Zip Code 33336				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Deliveries/Flowers				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: PSP14		Category/Type		Allocated Activity or Event Year-To-Date	
See Attached Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
81.22		81.23		162.45	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.22		81.23		162.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245333-10000
PROVIDE COMMERCE
Mailing Address 4840 EASTGATE
City SAN DIEGO State CA Zip Code 92121-1977
Purpose of Disbursement: Deliveries
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 31.48 NONFEDERAL SHARE 31.47 TOTAL AMOUNT 62.95

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245333-20000
TELEFLORA
Mailing Address 3737 NW 34TH
City OKLAHOMA CITY State OK Zip Code 73112-3353
Purpose of Disbursement: Flowers
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 49.74 NONFEDERAL SHARE 49.76 TOTAL AMOUNT 99.50

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245334
American Express
Mailing Address PO Box 360001
City Fort Lauderdale State FL Zip Code 33336
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP14
See Attached Memo Entry
FEDERAL SHARE 15.94 NONFEDERAL SHARE 15.94 TOTAL AMOUNT 31.88

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 15.94, 15.94, 31.88

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245334-10000 AMAZON MARKEPLACE NA - PA Mailing Address 440 TERRY AVE		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code SEATTLE WA 98109-5210	Allocated Activity or Event Year-To-Date <input type="text"/>	
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/Type	Date <input type="text"/> 11 / <input type="text"/> 25 / <input type="text"/> 2014
Activity or Event Identifier: [MEMO ITEM] Memo Entry		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 15.94 <input type="text"/> 15.94 <input type="text"/> 31.88

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245336 American Express Mailing Address PO Box 360001		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code Fort Lauderdale FL 33336	Allocated Activity or Event Year-To-Date <input type="text"/> 1398168.76	
Purpose of Disbursement: Event Supplies	<input type="text"/> Category/Type	Date <input type="text"/> 11 / <input type="text"/> 25 / <input type="text"/> 2014
Activity or Event Identifier: PSP14 See Attached Memo Entry		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 125.00 <input type="text"/> 125.00 <input type="text"/> 250.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245336-10000 ELEANOR'S LEGACY Mailing Address 349 FIFTH AVE		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code NEW YORK NY 10010	Allocated Activity or Event Year-To-Date <input type="text"/>	
Purpose of Disbursement: Event Supplies	<input type="text"/> Category/Type	Date <input type="text"/> 11 / <input type="text"/> 25 / <input type="text"/> 2014
Activity or Event Identifier: [MEMO ITEM] Memo Entry		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 125.00 <input type="text"/> 125.00 <input type="text"/> 250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 125.00		<input type="text"/> 125.00		<input type="text"/> 250.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245337		Allocated Activity or Event:					
Mailing Address PO Box 360001				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt					
City State Zip Code Fort Lauderdale FL 33336				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support					
Purpose of Disbursement: Publication & Dues				<input type="checkbox"/> Public Comm (ref to party only) by PAC					
Activity or Event Identifier: PSP14		Category/ Type		Allocated Activity or Event Year-To-Date 1398221.96					
See Attached Memo Entry				Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014					
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT	
26.60				26.60				53.20	

B. Full Name (Last, First, Middle Initial) THE NEW YORK TIMES CO		Transaction ID : H4-245337-10000		Allocated Activity or Event:					
Mailing Address 620 8TH AVE				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt					
City State Zip Code NEW YORK NY 10018-1604				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support					
Purpose of Disbursement: Publication & Dues				<input type="checkbox"/> Public Comm (ref to party only) by PAC					
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Category/ Type		Allocated Activity or Event Year-To-Date					
				Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014					
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT	
26.60				26.60				53.20	

C. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245338		Allocated Activity or Event:					
Mailing Address PO Box 360001				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt					
City State Zip Code Fort Lauderdale FL 33336				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support					
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC					
Activity or Event Identifier: PSP14		Category/ Type		Allocated Activity or Event Year-To-Date 1398774.54					
See Attached Memo Entry				Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014					
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT	
276.29				276.29				552.58	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
302.89		302.89		605.78

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245338-10000 TAXI CREDIT CARD CORP Mailing Address 5411 QUEENS B		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code WOODSIDE NY 11377-4642	Allocated Activity or Event Year-To-Date <input type="text"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/ Type	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 3.85 <input type="text"/> 3.85 <input type="text"/> 7.70	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245338-20000 LE PARKER MERIDIEN NEW YORK Mailing Address 104-70 QUEENS		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code FOREST HILLS NY 11375	Allocated Activity or Event Year-To-Date <input type="text"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/ Type	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 11.00 <input type="text"/> 11.00 <input type="text"/> 22.00	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245338-30000 METRO-NORTH TOMTVM2 Mailing Address 347 MADISON A		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code NEW YORK NY 10017-3739	Allocated Activity or Event Year-To-Date <input type="text"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/ Type	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 11.75 <input type="text"/> 11.75 <input type="text"/> 23.50	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) METRO-NORTH TOMTVM2 Mailing Address 347 MADISON A City NEW YORK State NY Zip Code 10017-3739 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245338-40000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 11 / 25 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 11.75 + 11.75 = 23.50		Category/Type Date

B. Full Name (Last, First, Middle Initial) EXPEDIA TRAVEL Mailing Address 10190 COVINGT City LAS VEGAS State NV Zip Code 89144-7054 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245338-50000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 11 / 25 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 201.99 + 201.99 = 403.98		Category/Type Date

C. Full Name (Last, First, Middle Initial) PERSHING SQUARE Mailing Address 90 E 42ND ST City NEW YORK State NY Zip Code 10017-5409 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245338-60000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 11 / 25 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 22.33 + 22.32 = 44.65		Category/Type Date

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) METRO-NORTH TOMTVM2		Transaction ID : H4-245338-70000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 347 MADISON A				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code NEW YORK NY 10017-3739				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: [MEMO ITEM] Memo Entry				Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
<input type="text" value="13.62"/>		<input type="text" value="13.63"/>		<input type="text" value="27.25"/>	

B. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245339		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 360001				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code Ft Lauderdale FL 33336-0001				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: PSP14				Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>	
See Attached Memo Entry				<input type="text" value="1399658.49"/>	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
<input type="text" value="441.97"/>		<input type="text" value="441.98"/>		<input type="text" value="883.95"/>	

C. Full Name (Last, First, Middle Initial) JETBLUE AIRWAYS		Transaction ID : H4-245339-10000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 6322 S 3000 E				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code SALT LAKE CIT UT 84121-6945				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: [MEMO ITEM] Memo Entry				Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
<input type="text" value="15.00"/>		<input type="text" value="15.00"/>		<input type="text" value="30.00"/>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="441.97"/>		<input type="text" value="441.98"/>		<input type="text" value="883.95"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: JETBLUE AIRWAYS. Transaction ID: H4-245339-20000. Allocated Activity or Event: Fundraising. Date: 11/25/2014. Amounts: FEDERAL SHARE 89.50, NONFEDERAL SHARE 89.49, TOTAL AMOUNT 178.99.

Form B: SOUTHWEST AIRLINES. Transaction ID: H4-245339-30000. Allocated Activity or Event: Fundraising. Date: 11/25/2014. Amounts: FEDERAL SHARE 112.55, NONFEDERAL SHARE 112.55, TOTAL AMOUNT 225.10.

Form C: CREATIVE MOBILE TECHN CMT. Transaction ID: H4-245339-40000. Allocated Activity or Event: Fundraising. Date: 11/25/2014. Amounts: FEDERAL SHARE 11.34, NONFEDERAL SHARE 11.33, TOTAL AMOUNT 22.67.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) UBER Mailing Address 1455 MARKET S City SAN FRANCISCO State CA Zip Code 94103 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245339-50000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 11 / 25 / 2014 Category/Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 65.00 + 65.00 = 130.00
---	--	--

B. Full Name (Last, First, Middle Initial) STARBUCKS C PIER CFC BOS Mailing Address TERMINAL B City BOSTON State MA Zip Code 02128 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245339-60000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 11 / 25 / 2014 Category/Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 1.23 + 1.23 = 2.46
---	--	--

C. Full Name (Last, First, Middle Initial) LEGAL SEA FOODS #223 Mailing Address TERMINAL C LO City BOSTON State MA Zip Code 02128 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245339-70000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 11 / 25 / 2014 Category/Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 17.42 + 17.41 = 34.83
--	--	---

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) RESTAURANT		Transaction ID : H4-245339-80000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 10 GLENLAKE P				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City ATLANTA State GA Zip Code 30328-3495				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
7.40		7.40		14.80	

B. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES		Transaction ID : H4-245339-90000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO BOX 36611				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City DALLAS State TX Zip Code 75235				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
122.53		122.57		245.10	

C. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245340		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 360001				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Fort Lauderdale State FL Zip Code 33335				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: PSP14				Date 11 / 25 / 2014	
See Attached Memo Entry				1402237.93	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
1289.72		1289.72		2579.44	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1289.72		1289.72		2579.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245340-10000 GARIBALDI'S ON PRESIDIO Mailing Address 347 PRESIDIO		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC										
City State Zip Code SAN FRANCISCO CA 94115-2045	Allocated Activity or Event Year-To-Date <input type="text"/>											
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/Type	Date <input type="text"/> 11 / <input type="text"/> 25 / <input type="text"/> 2014										
Activity or Event Identifier: [MEMO ITEM] Memo Entry		<table border="0"> <tr> <td style="text-align: center;">FEDERAL SHARE</td> <td style="text-align: center;">+</td> <td style="text-align: center;">NONFEDERAL SHARE</td> <td style="text-align: center;">=</td> <td style="text-align: center;">TOTAL AMOUNT</td> </tr> <tr> <td style="text-align: center;"><input type="text"/> 39.41</td> <td></td> <td style="text-align: center;"><input type="text"/> 39.41</td> <td></td> <td style="text-align: center;"><input type="text"/> 78.82</td> </tr> </table>		FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT	<input type="text"/> 39.41		<input type="text"/> 39.41	
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT								
<input type="text"/> 39.41		<input type="text"/> 39.41		<input type="text"/> 78.82								

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245340-20000 WALGREENS 01283 Mailing Address 500 GEARY ST		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC										
City State Zip Code SAN FRANCISCO CA 94102-1641	Allocated Activity or Event Year-To-Date <input type="text"/>											
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/Type	Date <input type="text"/> 11 / <input type="text"/> 25 / <input type="text"/> 2014										
Activity or Event Identifier: [MEMO ITEM] Memo Entry		<table border="0"> <tr> <td style="text-align: center;">FEDERAL SHARE</td> <td style="text-align: center;">+</td> <td style="text-align: center;">NONFEDERAL SHARE</td> <td style="text-align: center;">=</td> <td style="text-align: center;">TOTAL AMOUNT</td> </tr> <tr> <td style="text-align: center;"><input type="text"/> 1.93</td> <td></td> <td style="text-align: center;"><input type="text"/> 1.93</td> <td></td> <td style="text-align: center;"><input type="text"/> 3.86</td> </tr> </table>		FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT	<input type="text"/> 1.93		<input type="text"/> 1.93	
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT								
<input type="text"/> 1.93		<input type="text"/> 1.93		<input type="text"/> 3.86								

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245340-30000 SOCIALE Mailing Address 3665 SACRAMEN		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC										
City State Zip Code SAN FRANCISCO CA 94118-1709	Allocated Activity or Event Year-To-Date <input type="text"/>											
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/Type	Date <input type="text"/> 11 / <input type="text"/> 25 / <input type="text"/> 2014										
Activity or Event Identifier: [MEMO ITEM] Memo Entry		<table border="0"> <tr> <td style="text-align: center;">FEDERAL SHARE</td> <td style="text-align: center;">+</td> <td style="text-align: center;">NONFEDERAL SHARE</td> <td style="text-align: center;">=</td> <td style="text-align: center;">TOTAL AMOUNT</td> </tr> <tr> <td style="text-align: center;"><input type="text"/> 38.27</td> <td></td> <td style="text-align: center;"><input type="text"/> 38.27</td> <td></td> <td style="text-align: center;"><input type="text"/> 76.54</td> </tr> </table>		FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT	<input type="text"/> 38.27		<input type="text"/> 38.27	
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT								
<input type="text"/> 38.27		<input type="text"/> 38.27		<input type="text"/> 76.54								

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245340-40000
CALIFORNIA PARKING- 400 T
Mailing Address 400 TAYLOR ST
City SAN FRANCISCO State CA Zip Code 94102
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
11.00 11.00 22.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245340-50000
VIRGIN AM TKT SALES
Mailing Address 555 AIRPORT B
City BURLINGAME State CA Zip Code 94010-2036
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
75.00 75.00 150.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245340-60000
UNITED ELEC TICKETNG
Mailing Address 600 JEFFERSON
City HOUSTON State TX Zip Code 77002-7324
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
101.05 101.05 202.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) ALASKA AIRLINES Mailing Address 20833 INTERNA		Transaction ID : H4-245340-70000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City SEATTLE	State WA	Zip Code 98198-5950	Allocated Activity or Event Year-To-Date _____ Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			
FEDERAL SHARE		+ NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="585.61"/>		<input type="text" value="585.61"/>	<input type="text" value="1171.22"/>

B. Full Name (Last, First, Middle Initial) STARTBUCKS 664 Mailing Address LAUREL VILLAG		Transaction ID : H4-245340-80000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City SAN FRANCISCO	State CA	Zip Code 94118	Allocated Activity or Event Year-To-Date _____ Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			
FEDERAL SHARE		+ NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="1.83"/>		<input type="text" value="1.82"/>	<input type="text" value="3.65"/>

C. Full Name (Last, First, Middle Initial) VIRGIN AM TKT SALES Mailing Address 555 AIRPORT B		Transaction ID : H4-245340-90000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City BURLINGAME	State CA	Zip Code 94010-2036	Allocated Activity or Event Year-To-Date _____ Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			
FEDERAL SHARE		+ NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="117.55"/>		<input type="text" value="117.55"/>	<input type="text" value="235.10"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) UNIPARK LLC QPS		Transaction ID : H4-245340-100000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 909 MONTGOMER				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code SAN FRANCISCO CA 94133-4618				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
9.00		9.00		18.00	

B. Full Name (Last, First, Middle Initial) SQUARE		Transaction ID : H4-245340-110000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address ST 600				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code SAN FRANCISCO CA 94103				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
6.00		6.00		12.00	

C. Full Name (Last, First, Middle Initial) SQUARE		Transaction ID : H4-245340-120000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address ST 600				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code SAN FRANCISCO CA 94103				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
25.48		25.47		50.95	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Poco Dolce		Transaction ID : H4-245340-130000		Allocated Activity or Event:	
Mailing Address 1020 ILLINOIS				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code SAN FRANCISCO CA 94107				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/ Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
36.50		36.50		73.00	

B. Full Name (Last, First, Middle Initial) QUINCE RESTAURANT		Transaction ID : H4-245340-140000		Allocated Activity or Event:	
Mailing Address 470 PACIFIC A				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code SAN FRANCISCO CA 94133				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/ Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
38.24		38.23		76.47	

C. Full Name (Last, First, Middle Initial) DONATO		Transaction ID : H4-245340-150000		Allocated Activity or Event:	
Mailing Address 1041 MIDDLEFI				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code REDWOOD CITY CA 94063-1993				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/ Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
16.99		16.98		33.97	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) RESTAURANT		Transaction ID : H4-245340-160000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 90 NASSAU ST				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City PRINCETON State NJ Zip Code 08542-4529				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
6.50		6.49		12.99	

B. Full Name (Last, First, Middle Initial) STARBUCKS B UPPR003227153		Transaction ID : H4-245340-170000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address SEA-TAC INT'L				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City SEATTLE State WA Zip Code 98158				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
3.31		3.31		6.62	

C. Full Name (Last, First, Middle Initial) NAPA FARMS MARKET		Transaction ID : H4-245340-180000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address DOMESTIC TERM				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City SAN FRANCISCO State CA Zip Code 94128				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
4.82		4.82		9.64	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) RES PARKSFO LLC		Transaction ID : H4-245340-190000		Allocated Activity or Event:	
Mailing Address 195 N ACCESS				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City SOUTH SAN FRA State CA Zip Code 94080				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
17.97		17.96		35.93	

B. Full Name (Last, First, Middle Initial) LA PISA		Transaction ID : H4-245340-200000		Allocated Activity or Event:	
Mailing Address 22518 MARINE				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City SEATTLE State WA Zip Code 98198-6834				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
4.10		4.10		8.20	

C. Full Name (Last, First, Middle Initial) WOLPACK LESSEE LLC		Transaction ID : H4-245340-210000		Allocated Activity or Event:	
Mailing Address 1100 FIFTH AV				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City SEATTLE State WA Zip Code 98101				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
104.61		104.60		209.21	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: STARBUCKS A CONC003227155. Transaction ID: H4-245340-220000. Allocated Activity or Event: Fundraising. Date: 11/25/2014. Total Amount: 3.12.

Form B: SIMON & SEAFORT'S AK 10. Transaction ID: H4-245340-230000. Allocated Activity or Event: Fundraising. Date: 11/25/2014. Total Amount: 79.20.

Form C: STARBUCKS C WEST 00323515. Transaction ID: H4-245340-240000. Allocated Activity or Event: Fundraising. Date: 11/25/2014. Total Amount: 2.85.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) MCDONALDS #33728 Mailing Address 5000 INTERNAT		Transaction ID : H4-245340-250000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City ANCHORAGE State AK Zip Code 99502		Purpose of Disbursement: Travel/Accommodation /Meals		Allocated Activity or Event Year-To-Date <input type="text"/>	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Category/Type <input type="text"/>		Date <input type="text"/> 11 / <input type="text"/> 25 / <input type="text"/> 2014	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text"/> 1.96		<input type="text"/> 2.04		<input type="text"/> 4.00	

B. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001		Transaction ID : H4-245341		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Fort Lauderdale State FL Zip Code 33336		Purpose of Disbursement: Postage		Allocated Activity or Event Year-To-Date <input type="text"/> 1402325.65	
Activity or Event Identifier: See Attached Memo Entry		Category/Type <input type="text"/>		Date <input type="text"/> 11 / <input type="text"/> 25 / <input type="text"/> 2014	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text"/> 43.86		<input type="text"/> 43.86		<input type="text"/> 87.72	

C. Full Name (Last, First, Middle Initial) CAPITAL Mailing Address 900 BRENTWOOD		Transaction ID : H4-245341-10000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City WASHINGTON State DC Zip Code 20066-9201		Purpose of Disbursement: Postage		Allocated Activity or Event Year-To-Date <input type="text"/>	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Category/Type <input type="text"/>		Date <input type="text"/> 11 / <input type="text"/> 25 / <input type="text"/> 2014	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text"/> 12.02		<input type="text"/> 12.02		<input type="text"/> 24.04	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 43.86		<input type="text"/> 43.86		<input type="text"/> 87.72

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245341-20000 USPS/FRIENDSHIP STATION Mailing Address 4005 WISCONSI		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code WASHINGTON DC 20016	Allocated Activity or Event Year-To-Date <input type="text"/>		
Purpose of Disbursement: Postage	<input type="text"/> Category/ Type	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 5.24 <input type="text"/> 5.24 = <input type="text"/> 10.48	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245341-30000 CAPITAL Mailing Address 900 BRENTWOOD		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code WASHINGTON DC 20066-9201	Allocated Activity or Event Year-To-Date <input type="text"/>		
Purpose of Disbursement: Postage	<input type="text"/> Category/ Type	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 26.60 <input type="text"/> 26.60 = <input type="text"/> 53.20	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245342 American Express Mailing Address PO Box 360001		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Fort Lauderdale FL 33336	Allocated Activity or Event Year-To-Date <input type="text"/> 1402339.55		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/ Type	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
Activity or Event Identifier: PSP14 See Attached Memo Entry		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 6.95 <input type="text"/> 6.95 = <input type="text"/> 13.90	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 6.95		<input type="text"/> 6.95		<input type="text"/> 13.90

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) BREADFURST Mailing Address 4434 CONNECTI		Transaction ID : H4-245342-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City WASHINGTON	State DC	Zip Code 20008	Allocated Activity or Event Year-To-Date _____ Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			
FEDERAL SHARE		+	NONFEDERAL SHARE
_____ 6.95			_____ 6.95
		=	TOTAL AMOUNT
			_____ 13.90

B. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001		Transaction ID : H4-245348	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City Fort Lauderdale	State FL	Zip Code 33336	Allocated Activity or Event Year-To-Date _____ 1402430.79 Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
Purpose of Disbursement: Deliveries		Category/ Type	
Activity or Event Identifier: See Attached Memo Entry			
FEDERAL SHARE		+	NONFEDERAL SHARE
_____ 45.62			_____ 45.62
		=	TOTAL AMOUNT
			_____ 91.24

C. Full Name (Last, First, Middle Initial) PROVIDE COMMERCE Mailing Address 4840 EASTGATE		Transaction ID : H4-245348-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City SAN DIEGO	State CA	Zip Code 92121-1977	Allocated Activity or Event Year-To-Date _____ Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
Purpose of Disbursement: Deliveries		Category/ Type	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			
FEDERAL SHARE		+	NONFEDERAL SHARE
_____ 24.83			_____ 24.82
		=	TOTAL AMOUNT
			_____ 49.65

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 45.62		_____ 45.62		_____ 91.24

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) PROVIDE COMMERCE Mailing Address 4840 EASTGATE		Transaction ID : H4-245348-20000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code SAN DIEGO CA 92121-1977				Allocated Activity or Event Year-To-Date <input type="text"/>	
Purpose of Disbursement: Deliveries		<input type="text"/>		Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Category/ Type			
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text"/> 20.79		<input type="text"/> 20.80		<input type="text"/> 41.59	

B. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001		Transaction ID : H4-245349		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Fort Lauderdale FL 33336				Allocated Activity or Event Year-To-Date <input type="text"/> 1402510.89	
Purpose of Disbursement: Office Supplies Expenses		<input type="text"/>		Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
Activity or Event Identifier: PSP14		Category/ Type			
See Attached Memo Entry					
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text"/> 40.05		<input type="text"/> 40.05		<input type="text"/> 80.10	

C. Full Name (Last, First, Middle Initial) STAPLES 1612 Mailing Address 1509 WAUKEGAN		Transaction ID : H4-245349-10000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code GLENVIEW IL 60025-2122				Allocated Activity or Event Year-To-Date <input type="text"/>	
Purpose of Disbursement: Office Supplies Expenses		<input type="text"/>		Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Category/ Type			
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text"/> 19.51		<input type="text"/> 19.50		<input type="text"/> 39.01	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 40.05		<input type="text"/> 40.05		<input type="text"/> 80.10

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245349-20000 STAPLES 1612		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1509 WAUKEGAN		Allocated Activity or Event Year-To-Date _____	
City State Zip Code GLENVIEW IL 60025-2122	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Office Supplies Expenses	Category/Type <input type="text"/>		
Activity or Event Identifier: [MEMO ITEM] Memo Entry	_____		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="20.54"/>	<input type="text" value="20.55"/>	<input type="text" value="41.09"/>	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350 American Express		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001		Allocated Activity or Event Year-To-Date _____	
City State Zip Code Fort Lauderdale FL 33336	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	Category/Type <input type="text"/>		
Activity or Event Identifier: PSP14	_____		
See Attached Memo Entry			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="1246.63"/>	<input type="text" value="1246.64"/>	<input type="text" value="2493.27"/>	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350-10000 RIDECARGE INC		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5904 RICHMOND		Allocated Activity or Event Year-To-Date _____	
City State Zip Code ALEXANDRIA VA 22303-1864	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	Category/Type <input type="text"/>		
Activity or Event Identifier: [MEMO ITEM] Memo Entry	_____		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="4.70"/>	<input type="text" value="4.70"/>	<input type="text" value="9.40"/>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1246.63"/>		<input type="text" value="1246.64"/>		<input type="text" value="2493.27"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) HERTZ RAC FIREFLY		Transaction ID : H4-245350-20000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address CREDIT BILLIN				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City OKLAHOMA CITY State OK Zip Code 73134				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
159.07		159.06		318.13	

B. Full Name (Last, First, Middle Initial) AMERICAN TAXI DISPATCH		Transaction ID : H4-245350-30000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 834 E RAND RD				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City MOUNT PROSPEC State IL Zip Code 60056-2569				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
18.00		18.00		36.00	

C. Full Name (Last, First, Middle Initial) HAMPTON INN FRANKFORT		Transaction ID : H4-245350-40000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address ATT: 5 STR HS				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City FRANKFORT State KY Zip Code 40601				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
67.49		67.48		134.97	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) CAT SALES		Transaction ID : H4-245350-50000		Allocated Activity or Event:	
Mailing Address 539 S MAIN ST				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code FINDLAY OH 45840-3229				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/ Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
20.73		20.73		41.46	

B. Full Name (Last, First, Middle Initial) BUDGET CREDIT CLUB DEPT.		Transaction ID : H4-245350-60000		Allocated Activity or Event:	
Mailing Address 300 CENTRE PO				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code VIRGINIA BEAC VA 23462-4415				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/ Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
48.85		48.84		97.69	

C. Full Name (Last, First, Middle Initial) UNITED ELEC TICKETNG		Transaction ID : H4-245350-70000		Allocated Activity or Event:	
Mailing Address 600 JEFFERSON				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code HOUSTON TX 77002-7324				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/ Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
16.50		16.50		33.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) TAMAYO		Transaction ID : H4-245350-80000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1400 LARIMER				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
DENVER	CO	80202-1744		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Date	
Activity or Event Identifier:				M M / D D / Y Y Y Y Y Y 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.64			36.63		73.27

B. Full Name (Last, First, Middle Initial) PHILLIPS 66-CONOCO-76 CAT		Transaction ID : H4-245350-90000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 411 S KEELER				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
BARTLESVILLE	OK	74004		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Date	
Activity or Event Identifier:				M M / D D / Y Y Y Y Y Y 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.28			12.27		24.55

C. Full Name (Last, First, Middle Initial) BUDGET CREDIT CLUB DEPT.		Transaction ID : H4-245350-100000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 300 CENTRE PO				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
VIRGINIA BEAC	VA	23462-4415		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Date	
Activity or Event Identifier:				M M / D D / Y Y Y Y Y Y 11 / 25 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.14			57.13		114.27

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) LET THEM EAT CAKE		Transaction ID : H4-245350-110000		Allocated Activity or Event:	
Mailing Address 5800 S CICERO				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City CHICAGO State IL Zip Code 60638				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/ Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
4.77		4.76		9.53	

B. Full Name (Last, First, Middle Initial) MIDWAY PARK-ADSLINK		Transaction ID : H4-245350-120000		Allocated Activity or Event:	
Mailing Address 5757 S CICERO				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City CHICAGO State IL Zip Code 60638-3817				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/ Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
25.00		25.00		50.00	

C. Full Name (Last, First, Middle Initial) TIMBERLINE STEAKS & GRILL		Transaction ID : H4-245350-130000		Allocated Activity or Event:	
Mailing Address CONCORDS C				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City DENVER State CO Zip Code 80249-6363				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/ Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
7.73		7.73		15.46	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350-140000 HYATT REGENCY CONV CTR Mailing Address 650 15TH ST City DENVER State CO Zip Code 80202 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 167.10 167.10 334.20		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 11 / 25 / 2014
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B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350-150000 HYATT REGENCY CONV CTR F& Mailing Address 650 15TH ST City DENVER State CO Zip Code 80202-4207 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 15.38 15.38 30.76		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 11 / 25 / 2014
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C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350-160000 UNITED ELEC TICKETNG Mailing Address 600 JEFFERSON City HOUSTON State TX Zip Code 77002-7324 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 206.10 206.10 412.20		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 11 / 25 / 2014
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SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Full Name (Last, First, Middle Initial) CHILIS B12 ORD, Transaction ID : H4-245350-170000, Allocated Activity or Event: Fundraising, Date: 11/25/2014, Amounts: FEDERAL SHARE 5.98, NONFEDERAL SHARE 5.98, TOTAL AMOUNT 11.96

Form B: Full Name (Last, First, Middle Initial) MED GRILL EXP NORTH CBCB, Transaction ID : H4-245350-180000, Allocated Activity or Event: Fundraising, Date: 11/25/2014, Amounts: FEDERAL SHARE 3.75, NONFEDERAL SHARE 3.74, TOTAL AMOUNT 7.49

Form C: Full Name (Last, First, Middle Initial) SPEEDWAY, Transaction ID : H4-245350-190000, Allocated Activity or Event: Fundraising, Date: 11/25/2014, Amounts: FEDERAL SHARE 3.09, NONFEDERAL SHARE 3.09, TOTAL AMOUNT 6.18

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350-200000 HAMPTON INN & STES DET AP		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 31700 SMITH R		Allocated Activity or Event Year-To-Date _____	
City ROMULUS	State MI	Zip Code 48174-1976	Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014
Activity or Event Identifier: [MEMO ITEM] Memo Entry			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 63.54		_____ 63.54 = _____ 127.08	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350-210000 BUDGET CREDIT CLUB DEPT.		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 300 CENTRE PO		Allocated Activity or Event Year-To-Date _____	
City VIRGINIA BEAC	State VA	Zip Code 23462-4415	Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014
Activity or Event Identifier: [MEMO ITEM] Memo Entry			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 51.16		_____ 51.15 = _____ 102.31	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350-220000 O'HARE STORE 40		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10000 W O'HAR		Allocated Activity or Event Year-To-Date _____	
City CHICAGO	State IL	Zip Code 60666	Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date M M / D D / Y Y Y Y Y Y 11 / 25 / 2014
Activity or Event Identifier: [MEMO ITEM] Memo Entry			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 17.50		_____ 17.50 = _____ 35.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 0.00		_____ 0.00		_____ 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350-230000 COLORADO CAB COMPANY Mailing Address 7500 E 41ST A		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code DENVER CO 80216-4706	Purpose of Disbursement: Travel/Accommodation /Meals	Allocated Activity or Event Year-To-Date _____
Activity or Event Identifier: [MEMO ITEM] Memo Entry	Category/ Type	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		
<input type="text" value="38.10"/> + <input type="text" value="38.10"/> = <input type="text" value="76.20"/>		

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350-240000 MIDWAY PARK-ADSLINK Mailing Address 5757 S CICERO		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code CHICAGO IL 60638-3817	Purpose of Disbursement: Travel/Accommodation /Meals	Allocated Activity or Event Year-To-Date _____
Activity or Event Identifier: [MEMO ITEM] Memo Entry	Category/ Type	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		
<input type="text" value="12.00"/> + <input type="text" value="12.00"/> = <input type="text" value="24.00"/>		

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350-250000 UNITED AIRLINES Mailing Address DEPT HQJ-CM		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code HOUSTON TX 77002-7363	Purpose of Disbursement: Travel/Accommodation /Meals	Allocated Activity or Event Year-To-Date _____
Activity or Event Identifier: [MEMO ITEM] Memo Entry	Category/ Type	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		
<input type="text" value="37.50"/> + <input type="text" value="37.50"/> = <input type="text" value="75.00"/>		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) JOHNNY		Transaction ID : H4-245350-260000		Allocated Activity or Event:	
Mailing Address 6800 FLEUR DR				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City DES MOINES State IA Zip Code 50321-3127				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
5.77		5.76		11.53	

B. Full Name (Last, First, Middle Initial) PHILLIPS 66-CONOCO-76 CAT		Transaction ID : H4-245350-270000		Allocated Activity or Event:	
Mailing Address 411 S KEELER				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City BARTLESVILLE State OK Zip Code 74004				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
1.09		1.08		2.17	

C. Full Name (Last, First, Middle Initial) LOT A EPS		Transaction ID : H4-245350-280000		Allocated Activity or Event:	
Mailing Address 10000 W OHARE				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City CHICAGO State IL Zip Code 60666				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
20.00		20.00		40.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350-290000 DSM IOWA TAP RM 2151113		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address DES MOINES IN		Allocated Activity or Event Year-To-Date <input type="text"/>	
City DES MOINES State IA Zip Code 50321	<input type="text"/> Category/ Type	Date <input type="text"/> 11 / <input type="text"/> 25 / <input type="text"/> 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		<input type="text"/>	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		<input type="text"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		<input type="text"/>	
<input type="text"/> 6.03 + <input type="text"/> 6.02 = <input type="text"/> 12.05		<input type="text"/>	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350-300000 BUDGET RAC DES MOINES		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address MUNICIPAL AIR		Allocated Activity or Event Year-To-Date <input type="text"/>	
City DES MOINES State IA Zip Code 50321	<input type="text"/> Category/ Type	Date <input type="text"/> 11 / <input type="text"/> 25 / <input type="text"/> 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		<input type="text"/>	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		<input type="text"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		<input type="text"/>	
<input type="text"/> 12.43 + <input type="text"/> 12.42 = <input type="text"/> 24.85		<input type="text"/>	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245350-310000 DOUBLETREE BY HILTON HOTEL DES		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6800 FLEUR DR		Allocated Activity or Event Year-To-Date <input type="text"/>	
City DES MOINES State IA Zip Code 50321-3127	<input type="text"/> Category/ Type	Date <input type="text"/> 11 / <input type="text"/> 25 / <input type="text"/> 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		<input type="text"/>	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		<input type="text"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		<input type="text"/>	
<input type="text"/> 101.21 + <input type="text"/> 101.35 = <input type="text"/> 202.56		<input type="text"/>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245351	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 1406324.63	
City Fort Lauderdale	State FL	Zip Code 33336	Date 11 / 25 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date 11 / 25 / 2014	
Activity or Event Identifier: PSP14			Date 11 / 25 / 2014	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
660.23			660.24	1320.47

B. Full Name (Last, First, Middle Initial) UBER		Transaction ID : H4-245351-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1455 MARKET S			Allocated Activity or Event Year-To-Date	
City SAN FRANCISCO	State CA	Zip Code 94103	Date 11 / 25 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date 11 / 25 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			Date 11 / 25 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
46.18			46.18	92.36

C. Full Name (Last, First, Middle Initial) SQUARE		Transaction ID : H4-245351-20000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address ST 600			Allocated Activity or Event Year-To-Date	
City SAN FRANCISCO	State CA	Zip Code 94103	Date 11 / 25 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date 11 / 25 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			Date 11 / 25 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
58.89			58.89	117.78

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
660.23		660.24		1320.47

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245351-30000 CHESAPEAKE BAY ROASTING		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1302 BELT ST		Allocated Activity or Event Year-To-Date <input type="text"/>	
City State Zip Code BALTIMORE MD 21230-4760	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/ Type	Allocated Activity or Event Year-To-Date <input type="text"/>	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text"/> 3.75		<input type="text"/> 3.74 = <input type="text"/> 7.49	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245351-40000 NINFA'S ON NAVIGATION		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2704 NAVIGATI		Allocated Activity or Event Year-To-Date <input type="text"/>	
City State Zip Code HOUSTON TX 77003-1517	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/ Type	Allocated Activity or Event Year-To-Date <input type="text"/>	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text"/> 73.03		<input type="text"/> 73.02 = <input type="text"/> 146.05	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245351-50000 UNITED AIRLINES		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address DEPT HQJ-CM		Allocated Activity or Event Year-To-Date <input type="text"/>	
City State Zip Code HOUSTON TX 77002-7363	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/ Type	Allocated Activity or Event Year-To-Date <input type="text"/>	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text"/> 3.50		<input type="text"/> 3.49 = <input type="text"/> 6.99	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) SQUARE		Transaction ID : H4-245351-60000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address ST 600				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code SAN FRANCISCO CA 94103				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date	
[MEMO ITEM] Memo Entry				11 / 25 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
5.00				5.00	
		=		TOTAL AMOUNT	
				10.00	

B. Full Name (Last, First, Middle Initial) STATE LIMOUSINE SVCS		Transaction ID : H4-245351-70000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1001 TEXAS ST				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code HOUSTON TX 77002-3182				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date	
[MEMO ITEM] Memo Entry				11 / 25 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
39.00				39.00	
		=		TOTAL AMOUNT	
				78.00	

C. Full Name (Last, First, Middle Initial) SHOPIFY-PAYMENTS-CHARGE.C		Transaction ID : H4-245351-80000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 3RD FLOOR				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code SAN FRANCISCO CA 94110				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date	
[MEMO ITEM] Memo Entry				11 / 25 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
42.30				42.30	
		=		TOTAL AMOUNT	
				84.60	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245351-90000 NEWS CONN C SO 002230674 Mailing Address 3950 S TERMIN		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code HOUSTON TX 77032	Allocated Activity or Event Year-To-Date <input type="text"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/ Type	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		= FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 1.19 + <input type="text"/> 1.18 = <input type="text"/> 2.37	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245351-100000 HOTEL ICON AUTO COL Mailing Address 220 MAIN ST		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code HOUSTON TX 77002-1706	Allocated Activity or Event Year-To-Date <input type="text"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/ Type	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		= FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 10.66 + <input type="text"/> 10.66 = <input type="text"/> 21.32	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245351-110000 IAH URBAN CRAVE #4381413 Mailing Address 3500 TERMINAL		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code HOUSTON TX 77032	Allocated Activity or Event Year-To-Date <input type="text"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/ Type	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 25 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		= FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text"/> 7.04 + <input type="text"/> 7.03 = <input type="text"/> 14.07	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 0.00		<input type="text"/> 0.00		<input type="text"/> 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) GETRIDE.COM		Transaction ID : H4-245351-120000		Allocated Activity or Event:	
Mailing Address 1406 HAYS ST				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City HOUSTON State TX Zip Code 77009				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
35.25		35.25		70.50	

B. Full Name (Last, First, Middle Initial) CVS/PHARMACY #06069		Transaction ID : H4-245351-130000		Allocated Activity or Event:	
Mailing Address 1101 CONNECTI				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City WASHINGTON State DC Zip Code 20036-4303				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
2.11		2.11		4.22	

C. Full Name (Last, First, Middle Initial) HELLO CUPCAKE		Transaction ID : H4-245351-140000		Allocated Activity or Event:	
Mailing Address 1351 CONNECTI				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City WASHINGTON State DC Zip Code 20036-1801				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
36.00		36.00		72.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) UBER		Transaction ID : H4-245351-150000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1455 MARKET S				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code SAN FRANCISCO CA 94103				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text" value="9.86"/>		<input type="text" value="9.85"/>		<input type="text" value="19.71"/>	

B. Full Name (Last, First, Middle Initial) UBER		Transaction ID : H4-245351-160000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1455 MARKET S				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code SAN FRANCISCO CA 94103				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text" value="8.56"/>		<input type="text" value="8.56"/>		<input type="text" value="17.12"/>	

C. Full Name (Last, First, Middle Initial) PANERA BREAD 601420		Transaction ID : H4-245351-170000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1350 CONNECTI				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code WASHINGTON DC 20036				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text" value="19.59"/>		<input type="text" value="19.58"/>		<input type="text" value="39.17"/>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245351-180000 EXPEDIA TRAVEL		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10190 COVINGT		Allocated Activity or Event Year-To-Date _____		
City State Zip Code LAS VEGAS NV 89144-7054	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>			
Purpose of Disbursement: Travel/Accommodation /Meals	Category/ Type	Allocated Activity or Event Year-To-Date _____		
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="222.36"/>		<input type="text" value="222.36"/>		<input type="text" value="444.72"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245351-190000 HELLO CUPCAKE		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1351 CONNECTI		Allocated Activity or Event Year-To-Date _____		
City State Zip Code WASHINGTON DC 20036-1801	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>			
Purpose of Disbursement: Travel/Accommodation /Meals	Category/ Type	Allocated Activity or Event Year-To-Date _____		
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="35.96"/>		<input type="text" value="36.04"/>		<input type="text" value="72.00"/>

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245352 American Express		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001		Allocated Activity or Event Year-To-Date <input type="text" value="1406348.63"/>		
City State Zip Code American Express FL 33336	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>			
Purpose of Disbursement: Postage	Category/ Type	Allocated Activity or Event Year-To-Date _____		
Activity or Event Identifier: PSP14		Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>		
See Attached Memo Entry				
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="12.00"/>		<input type="text" value="12.00"/>		<input type="text" value="24.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="12.00"/>		<input type="text" value="12.00"/>		<input type="text" value="24.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) SAN ANTONIO		Transaction ID : H4-245352-10000		Allocated Activity or Event:	
Mailing Address 1 POST OFFICE				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code SAN ANTONIO TX 78284-8401				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Postage				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/ Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
3.45		3.44		6.89	

B. Full Name (Last, First, Middle Initial) FEDEX EXPRESS POS		Transaction ID : H4-245352-20000		Allocated Activity or Event:	
Mailing Address 3875 AIRWAYS				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code MEMPHIS TN 38116-5070				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Postage				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/ Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
8.55		8.56		17.11	

C. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245353		Allocated Activity or Event:	
Mailing Address PO Box 360001				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code American Express FL 33336				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: PSP14		Category/ Type		Allocated Activity or Event Year-To-Date	
See Attached Memo Entry				Date 11 / 25 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
43.50		43.50		87.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.50		43.50		87.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES		Transaction ID : H4-245353-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 36611			Allocated Activity or Event Year-To-Date	
City DALLAS	State TX	Zip Code 75235	Date 11 / 25 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			Date	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
43.50			43.50	87.00

B. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245354	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date	
City American Express	State FL	Zip Code 33336	Date 11 / 25 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date	
Activity or Event Identifier: PSP14			Date	
See Attached Memo Entry		Date		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
120.80			120.80	241.60

C. Full Name (Last, First, Middle Initial) THE HOUSTON CLUB # 2604		Transaction ID : H4-245354-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address SUITE 4900			Allocated Activity or Event Year-To-Date	
City HOUSTON	State TX	Zip Code 77002	Date 11 / 25 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			Date	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
52.91			52.90	105.81

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
120.80		120.80		241.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245354-20000 HOTEL ICON AUTO COL		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 220 MAIN ST		Allocated Activity or Event Year-To-Date _____		
City HOUSTON State TX Zip Code 77002-1706	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>			
Purpose of Disbursement: Travel/Accommodation /Meals	Category/Type <input type="text"/>	Allocated Activity or Event Year-To-Date _____		
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="46.54"/>		<input type="text" value="46.53"/>		<input type="text" value="93.07"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245354-30000 VOICE RESTAURANT AUTO COL		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 220 MAIN ST		Allocated Activity or Event Year-To-Date _____		
City HOUSTON State TX Zip Code 77002-1706	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>			
Purpose of Disbursement: Travel/Accommodation /Meals	Category/Type <input type="text"/>	Allocated Activity or Event Year-To-Date _____		
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="21.35"/>		<input type="text" value="21.37"/>		<input type="text" value="42.72"/>

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245368 Cornucopia, Inc.		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7510 Hamilton Spring Road		Allocated Activity or Event Year-To-Date <input type="text" value="1410677.23"/>		
City Bethesda State MD Zip Code 20817	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>			
Purpose of Disbursement: Consulting Fundraising	Category/Type <input type="text"/>	Allocated Activity or Event Year-To-Date <input type="text" value="1410677.23"/>		
Activity or Event Identifier: PSP14		Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2000.00"/>		<input type="text" value="2000.00"/>		<input type="text" value="4000.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2000.00"/>		<input type="text" value="2000.00"/>		<input type="text" value="4000.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Capital Strategies Mailing Address 14000 Old Harbor Lane #302 City Marina Del Rey State CA Zip Code 90292 Purpose of Disbursement: Consulting Fundraising Activity or Event Identifier: PSP14		Transaction ID : H4-245372 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date: 1415677.23 Date: 12 / 01 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 2500.00 + 2500.00 = 5000.00		Category/Type:

B. Full Name (Last, First, Middle Initial) Shellie Levin Solutions, Inc Mailing Address 22800 SW 157 Ave City Miami State FL Zip Code 33170 Purpose of Disbursement: Consulting Fundraising Activity or Event Identifier: PSP14		Transaction ID : H4-245378 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date: 1420677.23 Date: 12 / 01 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 2500.00 + 2500.00 = 5000.00		Category/Type:

C. Full Name (Last, First, Middle Initial) Yost Gold Consulting, Inc Mailing Address 2741 Brandywine St NW City Washington State DC Zip Code 20008 Purpose of Disbursement: Consulting Fundraising Activity or Event Identifier: PSP14		Transaction ID : H4-245383 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date: 1425677.23 Date: 12 / 01 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 2500.00 + 2500.00 = 5000.00		Category/Type:

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7500.00		7500.00		15000.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Encompass Elements Mailing Address 185 Discovery Drive Attn: Cathy Kaspar City Colmar State PA Zip Code 18915 Purpose of Disbursement: Postage Activity or Event Identifier: PSP14		Transaction ID : H4-245477 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1427616.94 Date 12 / 04 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 969.85 + 969.86 = 1939.71		

B. Full Name (Last, First, Middle Initial) Laura Rose Mailing Address 8100 N Madrone Trl City Austin State TX Zip Code 78737 Purpose of Disbursement: Telephone Activity or Event Identifier: PSP14 See Attached Memo Entry		Transaction ID : H4-245488 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1427626.94 Date 12 / 04 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 5.00 + 5.00 = 10.00		

C. Full Name (Last, First, Middle Initial) Time Warner Cable Mailing Address 730 W. Stassney Ln. Ste 100 City Austin State TX Zip Code 78745 Purpose of Disbursement: Telephone Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245488-10000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 04 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 5.00 + 5.00 = 10.00		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
974.85		974.86		1949.71

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Louisa Whitney Mailing Address 1701 16th Street NW Apartment 721 City Washington State DC Zip Code 20009 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: PSP14		Transaction ID : H4-245492 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1427633.74 Date 12 / 04 / 2014 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 3.40 + 3.40 = 6.80
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B. Full Name (Last, First, Middle Initial) Shellie Levin Solutions, Inc Mailing Address 22800 SW 157 Ave City Miami State FL Zip Code 33170 Purpose of Disbursement: Consulting Fundraising Activity or Event Identifier: PSP14		Transaction ID : H4-245858 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1437633.74 Date 12 / 05 / 2014 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 5000.00 + 5000.00 = 10000.00
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C. Full Name (Last, First, Middle Initial) Marissa Strickfaden Mailing Address 1100 First Street, SE Apt 511 City Washington State DC Zip Code 20003 Purpose of Disbursement: Void Check Activity or Event Identifier: PSP14		Transaction ID : H4-245509 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1437595.13 Date 12 / 09 / 2014 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT -19.30 + -19.31 = -38.61
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SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4984.10		4984.09		9968.19

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245512 Marissa Strickfaden		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1100 First Street, SE Apt 511		Allocated Activity or Event Year-To-Date 1437633.74	
City Washington State DC Zip Code 20003	Category/ Type	Date 12 / 09 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 19.30 + 19.31 = 38.61	
Activity or Event Identifier: PSP14			

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245513 Laura Rose Wilson		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8100 N. Madrone Trail		Allocated Activity or Event Year-To-Date 1437613.74	
City Austin State TX Zip Code 78737	Category/ Type	Date 12 / 09 / 2014	
Purpose of Disbursement: Void Check		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT -10.00 + -10.00 = -20.00	
Activity or Event Identifier: PSP14			

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245514 Laura Rose Wilson		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8100 N. Madrone Trail		Allocated Activity or Event Year-To-Date 1437633.74	
City Austin State TX Zip Code 78737	Category/ Type	Date 12 / 09 / 2014	
Purpose of Disbursement: Telephone		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 10.00 + 10.00 = 20.00	
Activity or Event Identifier: PSP14 See Attached Memo Entry			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.30		19.31		38.61

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245540 Chapman Cubine Adams Hussey		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2000 15th Street North Ste 550		Allocated Activity or Event Year-To-Date 1440633.74	
City State Zip Code Arlington VA 22201	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Design/Graphics		Allocated Activity or Event Year-To-Date 1440633.74	
Activity or Event Identifier: PSP14		Date <input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
500.00 + 500.00 = 1000.00			

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245541 Chapman Cubine Adams Hussey		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2000 15th Street North Ste 550		Allocated Activity or Event Year-To-Date 1440709.34	
City State Zip Code Arlington VA 22201	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Direct Mail Production		Allocated Activity or Event Year-To-Date 1440709.34	
Activity or Event Identifier: PSP14		Date <input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
37.80 + 37.80 = 75.60			

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245548 Lizzie Cooper		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 945 Route 35		Allocated Activity or Event Year-To-Date 1440754.19	
City State Zip Code Cross River NY 10518	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Telephone		Allocated Activity or Event Year-To-Date 1440754.19	
Activity or Event Identifier: PSP14 See Attached Memo Entry		Date <input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
22.42 + 22.43 = 44.85			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
560.22		560.23		1120.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Encompass Elements		Transaction ID : H4-245562		Allocated Activity or Event:	
Mailing Address 185 Discovery Drive Attn: Cathy Kaspar				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Colmar State PA Zip Code 18915				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Printing				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: PSP14		Category/ Type		Allocated Activity or Event Year-To-Date 1441711.43	
				Date 12 / 11 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
251.62				251.63	
		=		TOTAL AMOUNT	
				503.25	

B. Full Name (Last, First, Middle Initial) Encompass Elements		Transaction ID : H4-245563		Allocated Activity or Event:	
Mailing Address 185 Discovery Drive Attn: Cathy Kaspar				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Colmar State PA Zip Code 18915				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Direct Mail Production				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: PSP14		Category/ Type		Allocated Activity or Event Year-To-Date 1442104.66	
				Date 12 / 11 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
196.61				196.62	
		=		TOTAL AMOUNT	
				393.23	

C. Full Name (Last, First, Middle Initial) Soundpath Conferencing c/o American Teleconferencing Services		Transaction ID : H4-245606		Allocated Activity or Event:	
Mailing Address PO Box 405808				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Atlanta State GA Zip Code 30384				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Meeting/Conference				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: PSP14		Category/ Type		Allocated Activity or Event Year-To-Date 1443816.68	
				Date 12 / 11 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
856.01				856.01	
		=		TOTAL AMOUNT	
				1712.02	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1304.24		1304.26		2608.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: United Parcel Service. Transaction ID: H4-245617. Allocated Activity or Event: Fundraising. Date: 12/11/2014. Total Amount: 229.15.

Form B: Yost Gold Consulting, Inc. Transaction ID: H4-245622. Allocated Activity or Event: Fundraising. Date: 12/11/2014. Total Amount: 5000.00.

Form C: Bulletproof. Transaction ID: H4-245633. Allocated Activity or Event: Fundraising. Date: 12/18/2014. Total Amount: 37.50.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 2633.32, 2633.33, 5266.65.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Capital Strategies Mailing Address 14000 Old Harbor Lane #302 City Marina Del Rey State CA Zip Code 90292 Purpose of Disbursement: Consulting Fundraising Activity or Event Identifier: PSP14		Transaction ID : H4-245638 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1456583.33 Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 3750.00 + 3750.00 = 7500.00		Category/Type

B. Full Name (Last, First, Middle Initial) Miller's Office Products, Inc. Mailing Address PO Box 1537 City Newington State VA Zip Code 22122 Purpose of Disbursement: Office Supplies Expenses Activity or Event Identifier: PSP14		Transaction ID : H4-245652 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1456758.18 Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 87.42 + 87.43 = 174.85		Category/Type

C. Full Name (Last, First, Middle Initial) Michelle Ortiz Mailing Address 2801 Turk Blvd #306 City San Francisco State CA Zip Code 94118 Purpose of Disbursement: Telephone Activity or Event Identifier: PSP14 See Attached Memo Entry		Transaction ID : H4-245658 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1456793.18 Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 17.50 + 17.50 = 35.00		Category/Type

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3854.92		3854.93		7709.85

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245658-10000 Comcast		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 40 West Leeds Ave		Allocated Activity or Event Year-To-Date _____	
City Pleasantville State NJ Zip Code 08232	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Telephone		_____	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		_____	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
_____ 17.50		_____ 17.50	_____ 35.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245664 Louisa Whitney		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1701 16th Street NW Apartment 721		Allocated Activity or Event Year-To-Date _____ 1456797.18	
City Washington State DC Zip Code 20009	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Travel/Accommodation /Meals		_____	
Activity or Event Identifier: PSP14		_____	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
_____ 2.00		_____ 2.00	_____ 4.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245682 American Express		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001		Allocated Activity or Event Year-To-Date _____ 1458186.93	
City Fort Lauderdale State FL Zip Code 33336	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Travel/Accommodation /Meals		_____	
Activity or Event Identifier: PSP14 See Attached Memo Entry		_____	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
_____ 694.87		_____ 694.88	_____ 1389.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 696.87		_____ 696.88		_____ 1393.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) EXPEDIA TRAVEL		Transaction ID : H4-245682-10000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 10190 COVINGT				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City LAS VEGAS		State NV	Zip Code 89144-7054	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Category/Type		Date 12 / 18 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
415.44			415.44		830.88

B. Full Name (Last, First, Middle Initial) DAILY GRILL		Transaction ID : H4-245682-20000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1200 18TH ST				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City WASHINGTON		State DC	Zip Code 20036-2535	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Category/Type		Date 12 / 18 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.34			16.33		32.67

C. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES E TKT		Transaction ID : H4-245682-30000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address AMERICAN AIRL				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City TULSA		State OK	Zip Code 74133	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Category/Type		Date 12 / 18 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
263.09			263.11		526.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245684	Allocated Activity or Event:	
Mailing Address PO Box 360001			<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code	Allocated Activity or Event Year-To-Date 1458213.88 Date: MM / DD / YYYY 12 / 18 / 2014	
Fort Lauderdale	FL	33336		
Purpose of Disbursement: Postage		Category/ Type		
Activity or Event Identifier: PSP14				
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	
13.47			13.48	
		=	TOTAL AMOUNT	
			26.95	

B. Full Name (Last, First, Middle Initial) US POSTAL SERVICE		Transaction ID : H4-245684-10000	Allocated Activity or Event:	
Mailing Address 1000 WESTCHES			<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code	Allocated Activity or Event Year-To-Date Date: MM / DD / YYYY 12 / 18 / 2014	
WHITE PLAINS	NY	10610-1000		
Purpose of Disbursement: Postage		Category/ Type		
Activity or Event Identifier: [MEMO ITEM] Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	
10.68			10.67	
		=	TOTAL AMOUNT	
			21.35	

C. Full Name (Last, First, Middle Initial) FEDEX #5051		Transaction ID : H4-245684-20000	Allocated Activity or Event:	
Mailing Address 811 7TH AVENU			<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code	Allocated Activity or Event Year-To-Date Date: MM / DD / YYYY 12 / 18 / 2014	
NEW YORK	NY	10019		
Purpose of Disbursement: Postage		Category/ Type		
Activity or Event Identifier: [MEMO ITEM] Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	
2.79			2.81	
		=	TOTAL AMOUNT	
			5.60	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.47		13.48		26.95

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245685	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 1458267.08	
City Fort Lauderdale	State FL	Zip Code 33336	Date 12 / 18 / 2014	
Purpose of Disbursement: Publication & Dues		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: PSP14			Date 12 / 18 / 2014	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
26.60			26.60	53.20

B. Full Name (Last, First, Middle Initial) THE NEW YORK TIMES CO		Transaction ID : H4-245685-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 620 8TH AVE			Allocated Activity or Event Year-To-Date	
City NEW YORK	State NY	Zip Code 10018-1604	Date 12 / 18 / 2014	
Purpose of Disbursement: Publication & Dues		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			Date 12 / 18 / 2014	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
26.60			26.60	53.20

C. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245686	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 1459263.61	
City Fort Lauderdale	State FL	Zip Code 33336	Date 12 / 18 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: PSP14			Date 12 / 18 / 2014	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
498.26			498.27	996.53

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
524.86		524.87		1049.73

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) EXPEDIA TRAVEL Mailing Address 10190 COVINGT City LAS VEGAS State NV Zip Code 89144-7054 Purpose of Disbursement: Travel/Accommodation /Meals Credit Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245686-10000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014 Category/ Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT -201.99 + -201.99 = -403.98
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B. Full Name (Last, First, Middle Initial) EXPEDIA TRAVEL Mailing Address 10190 COVINGT City LAS VEGAS State NV Zip Code 89144-7054 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245686-20000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014 Category/ Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 184.78 + 184.77 = 369.55
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C. Full Name (Last, First, Middle Initial) GOGOAIR Mailing Address 303 S TECHNOL City BROOMFIELD State CO Zip Code 80021-3411 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245686-30000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014 Category/ Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 6.00 + 6.00 = 12.00
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SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) EXPEDIA TRAVEL		Transaction ID : H4-245686-40000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 10190 COVINGT				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City LAS VEGAS		State NV	Zip Code 89144-7054	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Category/Type		Date 12 / 18 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
253.64			253.63		507.27

B. Full Name (Last, First, Middle Initial) AMTRAK.COM		Transaction ID : H4-245686-50000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 60 MASSACHUSE				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City WASHINGTON		State DC	Zip Code 20002	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Category/Type		Date 12 / 18 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
171.00			171.00		342.00

C. Full Name (Last, First, Middle Initial) ALL TAXI MANAGEMENT INC		Transaction ID : H4-245686-60000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 4125 36TH ST				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City LONG ISLAND C		State NY	Zip Code 11101-1701	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Category/Type		Date 12 / 18 / 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.25			3.25		6.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245686-70000
METRO-NORTH TOMTVM2
Mailing Address 347 MADISON A
City NEW YORK State NY Zip Code 10017-3739
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 5.88 NONFEDERAL SHARE 5.87 TOTAL AMOUNT 11.75

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245686-80000
LIC TAXI MGMT INC
Mailing Address 2915 38TH AVE
City LONG ISLAND C State NY Zip Code 11101-2607
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 6.00 NONFEDERAL SHARE 6.00 TOTAL AMOUNT 12.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245686-90000
PIGALLE
Mailing Address 790 8TH AVE
City NEW YORK State NY Zip Code 10019-7568
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 3.09 NONFEDERAL SHARE 3.08 TOTAL AMOUNT 6.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) TRAVEL TRADERS #191 Mailing Address 811 7TH AVE City NEW YORK State NY Zip Code 10019-6002 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245686-100000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014 Category/Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 5.44 + 5.43 = 10.87
--	--	--

B. Full Name (Last, First, Middle Initial) METRO-NORTH TOMTVM2 Mailing Address 347 MADISON A City NEW YORK State NY Zip Code 10017-3739 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245686-110000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014 Category/Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 5.88 + 5.87 = 11.75
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C. Full Name (Last, First, Middle Initial) FA MANAGEMENT-7K18 Mailing Address 1106 BROADWAY City ASTORIA State NY Zip Code 11106-4838 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245686-120000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014 Category/Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 4.75 + 4.75 = 9.50
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SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245686-130000 SHERATON NY HOTEL TIMES S		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 811 7TH AVE		Allocated Activity or Event Year-To-Date _____	
City State Zip Code NEW YORK NY 10019-6002	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	Category/ Type	Allocated Activity or Event Year-To-Date _____	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 50.54		_____ 50.61	
		_____ 101.15	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245687 American Express		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001		Allocated Activity or Event Year-To-Date _____ 1460724.25	
City State Zip Code Ft Lauderdale FL 33336-0001	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	Category/ Type	Allocated Activity or Event Year-To-Date _____	
Activity or Event Identifier: PSP14		Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
See Attached Memo Entry			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 730.32		_____ 730.32	
		_____ 1460.64	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245687-10000 SOUTHWEST AIRLINES		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 36611		Allocated Activity or Event Year-To-Date _____	
City State Zip Code DALLAS TX 75235	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	Category/ Type	Allocated Activity or Event Year-To-Date _____	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 121.55		_____ 121.55	
		_____ 243.10	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
730.32		730.32		1460.64

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES		Transaction ID : H4-245687-20000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt		
Mailing Address PO BOX 36611				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support		
City	State	Zip Code				
DALLAS	TX	75235				
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date		
Activity or Event Identifier:				Date		
[MEMO ITEM] Memo Entry				12 / 18 / 2014		
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
121.55			121.55			243.10

B. Full Name (Last, First, Middle Initial) UBER		Transaction ID : H4-245687-30000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt		
Mailing Address 1455 MARKET S				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support		
City	State	Zip Code				
SAN FRANCISCO	CA	94103				
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date		
Activity or Event Identifier:				Date		
[MEMO ITEM] Memo Entry				12 / 18 / 2014		
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
11.00			11.00			22.00

C. Full Name (Last, First, Middle Initial) RIDECARGE INC		Transaction ID : H4-245687-40000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt		
Mailing Address 5904 RICHMOND				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support		
City	State	Zip Code				
ALEXANDRIA	VA	22303-1864				
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date		
Activity or Event Identifier:				Date		
[MEMO ITEM] Memo Entry				12 / 18 / 2014		
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
5.95			5.95			11.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245687-50000
AMTRAK TICKET COUNTER
Mailing Address 60 MASSACHUSE
City WASHINGTON State DC Zip Code 20002
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
15.00 15.00 30.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245687-60000
POST SECURITY-STARBUCKS00
Mailing Address 1001 WESTBROO
City PORTLAND State ME Zip Code 04102-1938
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
3.35 3.34 6.69

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245687-70000
AU BON PAIN CAFE#125
Mailing Address 50 MASSACHUSE
City WASHINGTON State DC Zip Code 20002-4214
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
5.60 5.59 11.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) MAND.ORNT.WASHINGTON		Transaction ID : H4-245687-80000		Allocated Activity or Event:	
Mailing Address 1330 MARYLAND				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code WASHINGTON DC 20024-2100				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date M M / D D / Y Y Y Y Y Y 12 18 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
79.40		79.40		158.80	

B. Full Name (Last, First, Middle Initial) UBER		Transaction ID : H4-245687-90000		Allocated Activity or Event:	
Mailing Address 1455 MARKET S				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code SAN FRANCISCO CA 94103				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date M M / D D / Y Y Y Y Y Y 12 18 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
7.50		7.50		15.00	

C. Full Name (Last, First, Middle Initial) GRAND CAB		Transaction ID : H4-245687-100000		Allocated Activity or Event:	
Mailing Address GRAND CAB				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code WASHINGTON DC 20018				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date M M / D D / Y Y Y Y Y Y 12 18 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
6.45		6.45		12.90	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) UBER		Transaction ID : H4-245687-110000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1455 MARKET S				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code SAN FRANCISCO CA 94103				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date M M / D D / Y Y Y Y Y Y 12 18 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
65.00		65.00		130.00	

B. Full Name (Last, First, Middle Initial) PORTLAND INTL JETPORT		Transaction ID : H4-245687-120000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 962 WESTBROOK				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code PORTLAND ME 04102-1915				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date M M / D D / Y Y Y Y Y Y 12 18 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
1.00		1.00		2.00	

C. Full Name (Last, First, Middle Initial) DOUBLETREE HOTEL WSHNGTN		Transaction ID : H4-245687-130000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1515 RHODE IS				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code WASHINGTON DC 20005-5504				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date M M / D D / Y Y Y Y Y Y 12 18 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
286.97		286.99		573.96	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245688	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 1460821.99	
City Fort Lauderdale	State FL	Zip Code 33335	Date 12 / 18 / 2014	
Purpose of Disbursement: Deliveries		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: PSP14			Date 12 / 18 / 2014	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
48.87			48.87	97.74

B. Full Name (Last, First, Middle Initial) AMAZON.COM LLC		Transaction ID : H4-245688-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1516 2ND AVE			Allocated Activity or Event Year-To-Date	
City SEATTLE	State WA	Zip Code 98101-1543	Date 12 / 18 / 2014	
Purpose of Disbursement: Deliveries		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			Date 12 / 18 / 2014	
[MEMO ITEM] Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
48.87			48.87	97.74

C. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245689	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 1461630.62	
City Fort Lauderdale	State FL	Zip Code 33335	Date 12 / 18 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: PSP14			Date 12 / 18 / 2014	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
404.31			404.32	808.63

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
453.18		453.19		906.37

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) CAPTAIN COOK HOTEL		Transaction ID : H4-245689-10000		Allocated Activity or Event:	
Mailing Address 939 W 5TH AVE				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City ANCHORAGE State AK Zip Code 99501-2032				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 12 / 18 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
106.20		106.20		212.40	

B. Full Name (Last, First, Middle Initial) RES PARKSFO LLC		Transaction ID : H4-245689-20000		Allocated Activity or Event:	
Mailing Address 195 N ACCESS				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City SOUTH SAN FRA State CA Zip Code 94080				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 12 / 18 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
17.97		17.96		35.93	

C. Full Name (Last, First, Middle Initial) THRIFTY CAR RENTAL		Transaction ID : H4-245689-30000		Allocated Activity or Event:	
Mailing Address 5000 W INTL A				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City ANCHORAGE State AK Zip Code 99502				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 12 / 18 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
42.65		42.65		85.30	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) VIRGIN AM TKT SALES Mailing Address 555 AIRPORT B City BURLINGAME State CA Zip Code 94010-2036 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245689-40000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 236.00 + 236.00 = 472.00		Category/Type Date 12 / 18 / 2014

B. Full Name (Last, First, Middle Initial) CITY OF BURLINGAME Mailing Address 501 PRIMROSE City BURLINGAME State CA Zip Code 94010-3997 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245689-50000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 1.49 + 1.51 = 3.00		Category/Type Date 12 / 18 / 2014

C. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City Fort Lauderdale State FL Zip Code 33336 Purpose of Disbursement: Catering/Facilities Activity or Event Identifier: PSP14 See Attached Memo Entry		Transaction ID : H4-245697 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 119.25 + 119.25 = 238.50		Category/Type Date 12 / 18 / 2014

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
119.25		119.25		238.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245697-10000 WEGMANS ONLINE CATERING # Mailing Address 9001 MCHUGH D City LANHAM State MD Zip Code 20706-1619 Purpose of Disbursement: Catering/Facilities Activity or Event Identifier: [MEMO ITEM] Memo Entry		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 119.25 + 119.25 = 238.50		Category/Type Date 12 / 18 / 2014

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245698 American Express Mailing Address PO Box 360001 City Fort Lauderdale State FL Zip Code 33336 Purpose of Disbursement: Office Supplies Expenses Activity or Event Identifier: PSP14 See Attached Memo Entry		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 8.98 + 8.99 = 17.97		Category/Type Date 12 / 18 / 2014

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245698-10000 STAPLES 1532 Mailing Address 1901 L ST NW City WASHINGTON State DC Zip Code 20036-3509 Purpose of Disbursement: Office Supplies Expenses Activity or Event Identifier: [MEMO ITEM] Memo Entry		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 8.98 + 8.99 = 17.97		Category/Type Date 12 / 18 / 2014

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.98		8.99		17.97

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245699	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 1461965.83	
City Fort Lauderdale	State FL	Zip Code 33336	Date 12 / 18 / 2014	
Purpose of Disbursement: Flowers		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: PSP14			Date 12 / 18 / 2014	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
39.37			39.37	78.74

B. Full Name (Last, First, Middle Initial) TELEFLORA		Transaction ID : H4-245699-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3737 NW 34TH			Allocated Activity or Event Year-To-Date	
City OKLAHOMA CITY	State OK	Zip Code 73112-3353	Date 12 / 18 / 2014	
Purpose of Disbursement: Flowers		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			Date 12 / 18 / 2014	
[MEMO ITEM] Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
39.37			39.37	78.74

C. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245700	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 1461971.68	
City Fort Lauderdale	State FL	Zip Code 33336	Date 12 / 18 / 2014	
Purpose of Disbursement: Postage		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: PSP14			Date 12 / 18 / 2014	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
2.92			2.93	5.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.29		42.30		84.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4-245700-10000 CAPITAL. Mailing Address 900 BRENTWOOD. City WASHINGTON State DC Zip Code 20066-9201. Purpose of Disbursement: Postage. Allocated Activity or Event: Fundraising. Date 12/18/2014. FEDERAL SHARE 2.92, NONFEDERAL SHARE 2.93, TOTAL AMOUNT 5.85.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4-245701 American Express. Mailing Address PO Box 360001. City Fort Lauderdale State FL Zip Code 33336. Purpose of Disbursement: Travel/Accommodation /Meals. Allocated Activity or Event: Fundraising. Date 12/18/2014. FEDERAL SHARE 55.49, NONFEDERAL SHARE 55.50, TOTAL AMOUNT 110.99.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4-245701-10000 MILLENNIUM HARVEST HOUSE, Mailing Address 1345 28TH ST. City BOULDER State CO Zip Code 80302-6803. Purpose of Disbursement: Travel/Accommodation /Meals. Allocated Activity or Event: Fundraising. Date 12/18/2014. FEDERAL SHARE 2.00, NONFEDERAL SHARE 1.99, TOTAL AMOUNT 3.99.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 55.49, 55.50, 110.99.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (blank), (blank), (blank).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) UBER		Transaction ID : H4-245701-20000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1455 MARKET S				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code SAN FRANCISCO CA 94103				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date M M / D D / Y Y Y Y Y Y 12 18 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
4.17		4.17		8.34	

B. Full Name (Last, First, Middle Initial) BUDGET.COM BUDGET.COM		Transaction ID : H4-245701-30000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 300 CENTRE PO				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code VIRGINIA BEAC VA 23462-4415				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals Credit		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date M M / D D / Y Y Y Y Y Y 12 18 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
-34.84		-34.83		-69.67	

C. Full Name (Last, First, Middle Initial) UBER		Transaction ID : H4-245701-40000		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1455 MARKET S				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code SAN FRANCISCO CA 94103				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date M M / D D / Y Y Y Y Y Y 12 18 2014	
[MEMO ITEM] Memo Entry					
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
5.65		5.65		11.30	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) UBER Mailing Address 1455 MARKET S City SAN FRANCISCO State CA Zip Code 94103 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245701-50000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 3.40 + 3.39 = 6.79		Category/Type Date 12 / 18 / 2014

B. Full Name (Last, First, Middle Initial) SONA CREAMERY AND WINE BA Mailing Address 660 PENNSYLVIA City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245701-60000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 57.30 + 57.30 = 114.60		Category/Type Date 12 / 18 / 2014

C. Full Name (Last, First, Middle Initial) UBER Mailing Address 1455 MARKET S City SAN FRANCISCO State CA Zip Code 94103 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245701-70000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 3.22 + 3.22 = 6.44		Category/Type Date 12 / 18 / 2014

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) UBER Mailing Address 1455 MARKET S City SAN FRANCISCO State CA Zip Code 94103 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245701-80000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014 Category/ Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 2.72 + 2.72 = 5.44
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B. Full Name (Last, First, Middle Initial) AU BON PAIN CAFE #61 Mailing Address 1801 L ST NW City WASHINGTON State DC Zip Code 20036-3811 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245701-90000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014 Category/ Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 2.41 + 2.41 = 4.82
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C. Full Name (Last, First, Middle Initial) RIDECARGE INC Mailing Address 5904 RICHMOND City ALEXANDRIA State VA Zip Code 22303-1864 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245701-100000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014 Category/ Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 7.61 + 7.61 = 15.22
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SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245701-110000 PRET A MANGER #0026		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1825 I ST NW		Allocated Activity or Event Year-To-Date _____		
City State Zip Code WASHINGTON DC 20006-5411	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>			
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/ Type	Allocated Activity or Event Year-To-Date _____		
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1.85"/>		<input type="text" value="1.87"/>		<input type="text" value="3.72"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245720 American Express		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 360001		Allocated Activity or Event Year-To-Date <input type="text" value="1462117.82"/>		
City State Zip Code Fort Lauderdale FL 33336	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>			
Purpose of Disbursement: Local Transportation	<input type="text"/> Category/ Type	Allocated Activity or Event Year-To-Date _____		
Activity or Event Identifier: PSP14		Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>		
See Attached Memo Entry				
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="17.57"/>		<input type="text" value="17.58"/>		<input type="text" value="35.15"/>

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245720-10000 TAXI CHARGE -DC		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 465 UTICA AVE		Allocated Activity or Event Year-To-Date _____		
City State Zip Code BROOKLYN NY 11203	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>			
Purpose of Disbursement: Local Transportation	<input type="text"/> Category/ Type	Allocated Activity or Event Year-To-Date _____		
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="11.04"/>		<input type="text" value="11.04"/>		<input type="text" value="22.08"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="17.57"/>		<input type="text" value="17.58"/>		<input type="text" value="35.15"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245720-20000 WALGREENS 15360		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 801 7TH ST NW		Allocated Activity or Event Year-To-Date _____	
City State Zip Code WASHINGTON DC 20001-3717	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Local Transportation	Category/ Type	Allocated Activity or Event Year-To-Date _____	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 6.53		_____ 6.54	
		_____ 13.07	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245724 American Express		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001		Allocated Activity or Event Year-To-Date _____ 1462114.54	
City State Zip Code Fort Lauderdale FL 33336	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Local Transportation Credit	Category/ Type	Allocated Activity or Event Year-To-Date _____	
Activity or Event Identifier: PSP14 See Attached Memo Entry		Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ -1.64		_____ -1.64	
		_____ -3.28	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245724-10000 UBER		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1455 MARKET S		Allocated Activity or Event Year-To-Date _____	
City State Zip Code SAN FRANCISCO CA 94103	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Local Transportation Credit	Category/ Type	Allocated Activity or Event Year-To-Date _____	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ -1.64		_____ -1.64	
		_____ -3.28	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ -1.64		_____ -1.64		_____ -3.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245725	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 1462124.53	
City Fort Lauderdale	State FL	Zip Code 33336	Date 12 / 18 / 2014	
Purpose of Disbursement: Office Supplies Expenses		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: PSP14			Date 12 / 18 / 2014	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	
4.99			5.00	
		=	TOTAL AMOUNT	
			9.99	

B. Full Name (Last, First, Middle Initial) DROPBOX		Transaction ID : H4-245725-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 185 BERRY ST			Allocated Activity or Event Year-To-Date	
City SAN FRANCISCO	State CA	Zip Code 94107-1725	Date 12 / 18 / 2014	
Purpose of Disbursement: Office Supplies Expenses		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			Date 12 / 18 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	
4.99			5.00	
		=	TOTAL AMOUNT	
			9.99	

C. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245742	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 1463059.85	
City Fort Lauderdale	State FL	Zip Code 33336	Date 12 / 18 / 2014	
Purpose of Disbursement: Flowers/Travel/Accommodation /Meals		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: PSP14			Date 12 / 18 / 2014	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	
467.66			467.66	
		=	TOTAL AMOUNT	
			935.32	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
472.65		472.66		945.31

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245742-10000 FLORISTS TRANSWORLD DELIV		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3113 WOODCREE		Allocated Activity or Event Year-To-Date _____	
City State Zip Code DOWNERS GROVE IL 60515-5412	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Flowers	<input type="text"/>	Allocated Activity or Event Year-To-Date _____	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="61.15"/>		<input type="text" value="61.15"/>	
		<input type="text" value="122.30"/>	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245742-20000 UBER		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1455 MARKET S		Allocated Activity or Event Year-To-Date _____	
City State Zip Code SAN FRANCISCO CA 94103	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/>	Allocated Activity or Event Year-To-Date _____	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="12.61"/>		<input type="text" value="12.61"/>	
		<input type="text" value="25.22"/>	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245742-30000 CHIPOTLE 0122		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1837 M ST NW		Allocated Activity or Event Year-To-Date _____	
City State Zip Code WASHINGTON DC 20036-2523	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/>	Allocated Activity or Event Year-To-Date _____	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="8.50"/>		<input type="text" value="8.50"/>	
		<input type="text" value="17.00"/>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) AMTRAK.COM		Transaction ID : H4-245742-40000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 60 MASSACHUSE			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
WASHINGTON	DC	20002	Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date	
Activity or Event Identifier:			M M / D D / Y Y Y Y Y Y 12 18 2014	
[MEMO ITEM] Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
133.50			133.50	267.00

B. Full Name (Last, First, Middle Initial) DAILY GRILL		Transaction ID : H4-245742-50000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1200 18TH ST			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
WASHINGTON	DC	20036-2535	Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date	
Activity or Event Identifier:			M M / D D / Y Y Y Y Y Y 12 18 2014	
[MEMO ITEM] Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
27.99			27.98	55.97

C. Full Name (Last, First, Middle Initial) UBER		Transaction ID : H4-245742-60000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1455 MARKET S			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
SAN FRANCISCO	CA	94103	Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date	
Activity or Event Identifier:			M M / D D / Y Y Y Y Y Y 12 18 2014	
[MEMO ITEM] Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
5.97			5.97	11.94

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245742-70000 MIDTOWN OPERATING CORP Mailing Address 4250 24TH ST City State Zip Code LONG ISLAND C NY 11101-4608 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 9.05 9.05 18.10		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
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B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245742-80000 PRET A MANGER 0042 Mailing Address 50 MASSACHUSE City State Zip Code WASHINGTON DC 20002 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 3.18 3.18 6.36		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
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C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245742-90000 SHERATON NY TIME SQ F&B Mailing Address 811 7TH AVE City State Zip Code NEW YORK NY 10019-6002 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 1.64 1.63 3.27		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
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SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245742-100000
LINDY'S AT 52ND ST 231
Mailing Address 604 5TH AVE
City NEW YORK State NY Zip Code 10020-2304
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 31.97 NONFEDERAL SHARE 31.96 TOTAL AMOUNT 63.93

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245742-110000
DC VIP CAB
Mailing Address 2606 BLADENSB
City WASHINGTON State DC Zip Code 20018-1423
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 8.21 NONFEDERAL SHARE 8.20 TOTAL AMOUNT 16.41

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245742-120000
AMTRAK.COM
Mailing Address 60 MASSACHUSE
City WASHINGTON State DC Zip Code 20002
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 133.50 NONFEDERAL SHARE 133.50 TOTAL AMOUNT 267.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245742-130000 SHERATON NY HOTEL TIMES S Mailing Address 811 7TH AVE City NEW YORK State NY Zip Code 10019-6002 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 30.39 30.43 60.82		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
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B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245744 American Express Mailing Address PO Box 360001 City Fort Lauderdale State FL Zip Code 33336 Purpose of Disbursement: Mileage Credit Activity or Event Identifier: PSP14 See Attached Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT -222.36 -222.36 -444.72		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
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C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245744-10000 EXPEDIA TRAVEL Mailing Address 10190 COVINGT City LAS VEGAS State NV Zip Code 89144-7054 Purpose of Disbursement: Mileage Credit Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT -222.36 -222.36 -444.72		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
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SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-222.36		-222.36		-444.72

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245747	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 1462664.13	
City Fort Lauderdale	State FL	Zip Code 33336	Date 12 / 18 / 2014	
Purpose of Disbursement: Postage		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: PSP14			Date 12 / 18 / 2014	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
24.50			24.50	49.00

B. Full Name (Last, First, Middle Initial) CAPITAL		Transaction ID : H4-245747-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 900 BRENTWOOD			Allocated Activity or Event Year-To-Date	
City WASHINGTON	State DC	Zip Code 20066-9201	Date 12 / 18 / 2014	
Purpose of Disbursement: Postage		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			Date 12 / 18 / 2014	
[MEMO ITEM] Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
24.50			24.50	49.00

C. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245748	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 1462774.94	
City Fort Lauderdale	State FL	Zip Code 33336	Date 12 / 18 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: PSP14			Date 12 / 18 / 2014	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
55.40			55.41	110.81

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.90		79.91		159.81

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-245748-10000 FRIENDSHIP STATION APC 2 Mailing Address 4005 WISCONSI		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code WASHINGTON DC 20016	Allocated Activity or Event Year-To-Date _____		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="checkbox"/> Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		= FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text" value="3.85"/> + <input type="text" value="3.85"/> = <input type="text" value="7.70"/>	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-245748-20000 UBER Mailing Address 1455 MARKET S		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code SAN FRANCISCO CA 94103	Allocated Activity or Event Year-To-Date _____		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="checkbox"/> Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		= FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text" value="12.66"/> + <input type="text" value="12.66"/> = <input type="text" value="25.32"/>	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-245748-30000 UBER Mailing Address 1455 MARKET S		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code SAN FRANCISCO CA 94103	Allocated Activity or Event Year-To-Date _____		
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="checkbox"/> Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: [MEMO ITEM] Memo Entry		= FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text" value="17.52"/> + <input type="text" value="17.52"/> = <input type="text" value="35.04"/>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) MAND.ORNT.WASHINGTON Mailing Address 1330 MARYLAND City WASHINGTON State DC Zip Code 20024-2100 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier:		Transaction ID : H4-245748-40000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
[MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 6.40 + 6.40 = 12.80		Category/Type

B. Full Name (Last, First, Middle Initial) UBER Mailing Address 1455 MARKET S City SAN FRANCISCO State CA Zip Code 94103 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier:		Transaction ID : H4-245748-50000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
[MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 7.64 + 7.63 = 15.27		Category/Type

C. Full Name (Last, First, Middle Initial) CREATIVE MOBILE TECHN CMT Mailing Address 1151 47TH AVE City LONG ISLAND C State NY Zip Code 11101-5418 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier:		Transaction ID : H4-245748-60000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
[MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 7.33 + 7.35 = 14.68		Category/Type

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245749	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 1463571.10	
City Fort Lauderdale	State FL	Zip Code 33336	Date 12 / 18 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: PSP14 See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
398.08			398.08	796.16

B. Full Name (Last, First, Middle Initial) BOINGO WIRELESS		Transaction ID : H4-245749-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10960 WILSHIR			Allocated Activity or Event Year-To-Date	
City LOS ANGELES	State CA	Zip Code 90024-3711	Date 12 / 18 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
2.49			2.49	4.98

C. Full Name (Last, First, Middle Initial) UNITED ELEC TICKETNG		Transaction ID : H4-245749-20000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 600 JEFFERSON			Allocated Activity or Event Year-To-Date	
City HOUSTON	State TX	Zip Code 77002-7324	Date 12 / 18 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
152.60			152.60	305.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
398.08		398.08		796.16

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) UNITED AIRLINES		Transaction ID : H4-245749-30000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address DEPT HQJ-CM			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City HOUSTON State TX Zip Code 77002-7363			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:			Date 12 / 18 / 2014	
[MEMO ITEM] Memo Entry				
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.00		100.00		200.00

B. Full Name (Last, First, Middle Initial) UNITED ELEC TICKETNG		Transaction ID : H4-245749-40000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 600 JEFFERSON			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City HOUSTON State TX Zip Code 77002-7324			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:			Date 12 / 18 / 2014	
[MEMO ITEM] Memo Entry				
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.00		14.00		28.00

C. Full Name (Last, First, Middle Initial) UNITED ELEC TICKETNG		Transaction ID : H4-245749-50000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 600 JEFFERSON			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City HOUSTON State TX Zip Code 77002-7324			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:			Date 12 / 18 / 2014	
[MEMO ITEM] Memo Entry				
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.50		26.50		53.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: UNITED AIRLINES. Transaction ID: H4-245749-60000. Allocated Activity: Fundraising. Date: 12/18/2014. Amounts: FEDERAL SHARE 100.00, NONFEDERAL SHARE 100.00, TOTAL AMOUNT 200.00.

Form B: BOINGO WIRELESS. Transaction ID: H4-245749-70000. Allocated Activity: Fundraising. Date: 12/18/2014. Amounts: FEDERAL SHARE 2.49, NONFEDERAL SHARE 2.49, TOTAL AMOUNT 4.98.

Form C: American Express. Transaction ID: H4-245750. Allocated Activity: Fundraising. Date: 12/18/2014. Amounts: FEDERAL SHARE 5.42, NONFEDERAL SHARE 5.42, TOTAL AMOUNT 10.84.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 5.42, NONFEDERAL SHARE 5.42, TOTAL AMOUNT 10.84.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) PAUL BAKERY Mailing Address 1000 CONNECTI City WASHINGTON State DC Zip Code 20036 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245750-10000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 5.42 + 5.42 = 10.84		Category/Type Date

B. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City American Express State FL Zip Code 33336 Purpose of Disbursement: Postage Activity or Event Identifier: PSP14 See Attached Memo Entry		Transaction ID : H4-245752 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 85.06 + 85.06 = 170.12		Category/Type Date

C. Full Name (Last, First, Middle Initial) THE UPS STORE #5830 Mailing Address 4301 W WILLIA City AUSTIN State TX Zip Code 78749 Purpose of Disbursement: Postage Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-245752-10000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 12 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 85.06 + 85.06 = 170.12		Category/Type Date

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.06		85.06		170.12

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-245753	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 1463767.56	
City American Express	State FL	Zip Code 33336	Date 12 / 18 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: PSP14			Date 12 / 18 / 2014	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
7.75			7.75	15.50

B. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES		Transaction ID : H4-245753-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 36611			Allocated Activity or Event Year-To-Date	
City DALLAS	State TX	Zip Code 75235	Date 12 / 18 / 2014	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date 12 / 18 / 2014	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			Date 12 / 18 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
7.75			7.75	15.50

C. Full Name (Last, First, Middle Initial) Linemark Printing		Transaction ID : H4-245853	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 501 Prince George Blvd			Allocated Activity or Event Year-To-Date 1467723.45	
City Upper Marlboro	State MD	Zip Code 20774	Date 12 / 22 / 2014	
Purpose of Disbursement: Postage		Category/ Type	Date 12 / 22 / 2014	
Activity or Event Identifier: PSP14			Date 12 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
1977.94			1977.95	3955.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1985.69		1985.70		3971.39

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Cornucopia, Inc.		Transaction ID : H4-245967		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7510 Hamilton Spring Road					
City Bethesda	State MD	Zip Code 20817			
Purpose of Disbursement: Consulting Fundraising		<input type="text"/>		Allocated Activity or Event Year-To-Date <input type="text"/> 1471723.45	
Activity or Event Identifier: PSP14		<input type="text"/>		Date <input type="text"/> 12 / <input type="text"/> 31 / <input type="text"/> 2014	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text"/> 2000.00		<input type="text"/> 2000.00		<input type="text"/> 4000.00	

B. Full Name (Last, First, Middle Initial)				Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address					
City	State	Zip Code			
Purpose of Disbursement:		<input type="text"/>		Allocated Activity or Event Year-To-Date <input type="text"/>	
Activity or Event Identifier:		<input type="text"/>		Date <input type="text"/> / <input type="text"/> / <input type="text"/>	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text"/>		<input type="text"/>		<input type="text"/>	

C. Full Name (Last, First, Middle Initial)				Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address					
City	State	Zip Code			
Purpose of Disbursement:		<input type="text"/>		Allocated Activity or Event Year-To-Date <input type="text"/>	
Activity or Event Identifier:		<input type="text"/>		Date <input type="text"/> / <input type="text"/> / <input type="text"/>	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text"/>		<input type="text"/>		<input type="text"/>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 2000.00		<input type="text"/> 2000.00		<input type="text"/> 4000.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/> 47097.56	<input type="text"/> 47097.80	<input type="text"/> 94195.36