FEC FORM 3X	AN	ND DISE	BURSE	CEIPTS MENTS rized Commit	tee	C	Office Use Only	
1. NAME OF COMMITTEE (in fu		FEC MAILING		Example: If typin over the lines	g, type		· · ·	
	PAC							
ADDRESS (number and	street)	016 LINCOLN 	BLVD., SUITE	303				
Check if differ than previousl reported. (ACC	/	AN FRANCISC	:0 				94129	
2. FEC IDENTIFICAT	ION NUMBER	₩	CITY	k	S	TATE	ZIPCODE 🔺	L
C00450098	• • • •		3. IS TH REP		NEW (N) OR	AME (A)	NDED	
4. TYPE OF REPC (Choose One) (a) Quarterly Rep		(b) Monthly Report Due On:	Feb 20 Mar 20		May 20 (M5) Jun 20 (M6)	Aug 20 X Sep 20	(M8) (Non- Year Dec	20 (M11) Election Only) 20 (M12) Election Only)
July 15 Quarterly October Quarterly	Report(Q3)	(c) 12-Day PRE -E Report		Primary (12 Convention		General (12 Special (12	(M10) Jan 3 G) Runc	off (12R)
July 31 M Report(N Year Only	lid-Year on-election		/ Election for the: Election o	General (30	G)	Runoff (30F		cial (30S)
5. Covering Period	08	01	2008	through	08	31	2008	
I certify that I have exam Type or Print Name of T		rt and to the bes JOAN STECKL	•	edge and belief it is	s true, correct a	nd complete.		
Signature of Treasurer	Electronical	y Filed by JO	AN STECKLE	R	Da	ate 09	19 200	8
NOTE : Submission of f	alse, erroneous	s, or incomplete	information ma	ay subject the pers	son signing this	Report to the pe	enalties of 2 U.S.C 43	7g.
Office Use Only							FEC FORM 3) (Rev. 12/2004)	

Image# 28992178195 FEC Form 3X (Rev. 02/2003)		SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
W	Vrite or Type Committee Name WOMENCOUNT PAC		1 490 2
R	eport Covering the Period: From:	M * M D * D Y * Y * W * Y 0 8 0 1 2 0 0 8	To:
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2008 Y Y		0.00
	(b) Cash on Hand at Begining of Reporting Period	. 64039.19	
	(c) Total Receipts (from Line 19)	7082.60	438245.27
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	. 71121.79	438245.27
7.	Total Disbursements (from Line 31)		387104.51
8.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	51140.76	51140.76
9.	Debts and Obligations owed TO		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY	—	
	the committee (Itemize all on Schedule C and/or Schedule D)	2954.75	

X 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

FE6AN026

	FEC Form 3X (Rev. 06/2004)	OF RECEIPTS	Page 3
	ite or Type Committee Name WOMENCOUNT PAC		
Re	port Covering the Period: From:	M M D D Y Y W Y </th <th>M M D D Y Y Y Y Y 0 8 3 1 2 0 0 8</th>	M M D D Y Y Y Y Y 0 8 3 1 2 0 0 8
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: (a) Individuals/Persons Other		
,	Than Political Committees (i) Itemized (use Schedule A)	5812.60	399891.47
	(ii) Unitemized	1270.00	37853.80
	(iii) TOTAL (add Lines 11(a)(i) and (ii) ♪	7082.60	437745.27
((b) Political Party Committees	0.00	0.00
·	 (c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines 	0.00	500.00
(11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	7082.60	438245.27
	Transfers From Affiliated/Other Party Committees	0.00	0.00
13. /	All Loans Received	0.00	0.00
	_oan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
t	o Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
	Transfers from Non-Federal and Levin Fund	ds	
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	7082.60	438245.27
	Total Federal Receipts (subtract Line 18(c) from Line 19)	7082.60	438245.27

Image# 28992178197

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)		Page 4
	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	19981.03	69604.64
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) >	19981.03	69604.64
	Transfers to Affiliated/Other Party Committees	0.00	0.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees	0.00	8500.00
	Independent Expenditure (use Schedule E)	0.00	304749.87
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
27.	Loans Made	0.00	0.00
	Refunds of Contributions To: (a) Individuals/Persons Other	0.00	1000.00
	Than Political Committees (b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) >	0.00	1000.00
29.	Other Disbursements	0.00	3250.00
30.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
81.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	19981.03	387104.51
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	19981.03	387104.51

Image# 28992178198

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)		
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)	7082.60	438245.27
34.	Total Contribution Refunds (from Line 28(d))	0.00	1000.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	7082.60	437245.27
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	19981.03	69604.64
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	19981.03	69604.64

FE6AN026

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S or for commercial purposes, other than using the	Use separate schedule(s) for each category of the Detailed Summary Page tatements may not be sold or used by any person name and address of any political committee to	FOR LINE NUMBER: PAGE 6 / 19 (check only one) 11a 11b 11c 12 X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions from such committee. 110 110
	NAME OF COMMITTEE (In Full) WOMENCOUNT PAC	,	
A .	Full Name (Last, First, Middle Initial) STACY MASON Mailing Address 839 MELVILLE AVENU	IE	Date of Receipt
		08 01 2008	
	City	State Zip Code	Transaction ID: NON.A.1372
	PALO ALTO	CA 94301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	37.60
	Name of Employer NONE	Occupation NOT EMPLOYED	- IN KIND CONTRIBUTION
	Receipt For:	Aggregate Year-to-Date ▼	7
	Primary General Other (specify) ▼	1189.49]
В.	Full Name (Last, First, Middle Initial) AENOR J. SAWYER		Date of Receipt
	Mailing Address 1977 GASPAR DR.		M · M / D · D Y Y · Y <
	City	State Zip Code	Transaction ID: INC.A.1302
	Oakland	CA 94611-264	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer SELF	Occupation PHYSICIAN	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	1000.00]
с.	Full Name (Last, First, Middle Initial) LYNN MEDAJ		Date of Receipt
	Mailing Address 104 ELMCREST CIRC		M · M / D · D Y Y · Y · Y Y Y · Y Y
	City	State Zip Code	Transaction ID: INC.A.1321
	LIVERPOOL	NY 13090	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer SYRACUSE CITY SCHOOLS	Occupation TEACHER	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00]
	SUBTOTAL of Receipts This Page (optional)		1137.60
	TOTAL This Period (last page this line number		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NL (check only or X 11a 13	
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) WOMENCOUNT PAC				
A.	Full Name (Last, First, Middle Initial) BIERTA BARFOD Mailing Address 337 NE 56TH STREE	T		Date of Re	
	0.1	01-1-2	7. 0. 1.	08	20 2008
	City SEATTLE	State WA	Zip Code 98105		Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			100.00
	Name of Employer KATSUTA HOSPITAL	Occupatio EDITOR	n		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 300.00]	
- B.	Full Name (Last, First, Middle Initial) MELISSA CZARNECKI			Date of Re	eceipt
	Mailing Address 22280 TORO HILLS D	DRIVE		м м / 08	20 / Y Y Y Y 20 2008
	City	State	Zip Code	Transactio	on ID: INC.A.1343
	SALINAS	CA	93908	Amount of	Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer NONE	Occupatio UNEMPL			
	Receipt For:	Aggregate	e Year-to-Date 🔻	_	
	Primary General Other (specify) ▼	0 0	250.00		
- C.	Full Name (Last, First, Middle Initial) ROBERTA HUMPHREYS			Date of Re	ceipt
	Mailing Address 594 POND VIEW DRI	VE		0 8 /	D D / Y Y Y Y 20 2008
	City	State	Zip Code	Transactio	n ID: INC.A.1342
	MENDOTA HTS	MN	55120	Amount of	Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			100.00
	Name of Employer UNIVERSITY OF MINNESOTA	Occupatio PROFES	SOR		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date 🔻 850.00]	
ſ	SUBTOTAL of Receipts This Page (optional)				250.00
Ī	TOTAL This Period (last page this line number	r only)			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 19 (check only one) 11a X 11a 13 14 15 16 17 on for the purpose of soliciting contributions
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) WOMENCOUNT PAC	name and ad	dress of any political committee to	solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) SUSANNAH JONES Mailing Address 11359 ROUGH AND F	READY RD.		Date of Receipt
				08 20 2008
	City ROUGH AND READY	State CA	Zip Code	Transaction ID: INC.A.1324
	FEC ID number of contributing federal political committee.	C	95975	Amount of Each Receipt this Period
	Name of Employer SELF EMPLOYED/SAME NAME	Occupation	n STATE INVESTOR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 275.00]
в.	Full Name (Last, First, Middle Initial) LAURA LAUDER Mailing Address 88 MERCEDES LANE	I		Date of Receipt
				08 20 2008
	City ATHERTON	State CA	Zip Code 94027	Transaction ID: INC.A.1326
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 1750.00
	Name of Employer LAUDER PARTNERS,LLC	Occupatio VENTUF	n RE CAPITALIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 2000.00]
- C.	Full Name (Last, First, Middle Initial) LAURA LAUDER			Date of Receipt
	Mailing Address 88 MERCEDES LANE			08 / D D / Y Y Y Y 08 20 2008
	City	State	Zip Code	Transaction ID: INC.A.1325
	ATHERTON	CA	94027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer LAUDER PARTNERS,LLC Receipt For:	1 1	RE CAPITALIST	_
	Primary General Other (specify) ▼		e Year-to-Date ▼ 2000.00]
	SUBTOTAL of Receipts This Page (optional)			2050.00
ſ	TOTAL This Period (last page this line number	only)		

ITEMIZ	DULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 19 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
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	OF COMMITTEE (In Full) ENCOUNT PAC			
Full Na				Date of Receipt
Mailing	Address 339 NORTH PITT STRE	ET		M M / D D / Y Y Y Y 08 20 2008
City		State	Zip Code	Transaction ID: INC.A.1341
ALEX	ANDRIA	VA	22314	Amount of Each Receipt this Period
) number of contributing political committee.	C		50.00
Name o NONE	of Employer	Occupation RETIRED		
Receip		Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) v	0 0	550.00	
	me (Last, First, Middle Initial) R GOWDY			Date of Receipt
	Address 1201 MARIPOSA			M M / D D Y
City		State	Zip Code	Transaction ID: INC.A.1355
	FRANCISCO) number of contributing	CA	94107	Amount of Each Receipt this Period
federal	political committee.	C		2300.00
Name o OWNE	of Employer ER/CEO	Occupation THAYER	PHOTOGRAPHS	
Receip		Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) v	0 0	2300.00	
	me (Last, First, Middle Initial) INAH JONES			Date of Receipt
Mailing	Address 11359 ROUGH AND RE	EADY RD.		M M / D D / Y Y Y Y 0 8 2 8 2 0 0 8
City		State	Zip Code	Transaction ID: INC.A.1359
	GH AND READY	CA	95975	Amount of Each Receipt this Period
) number of contributing political committee.	C		25.00
	of Employer EMPLOYED/SAME NAME	-1	TATE INVESTOR	
	t For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00]
SUBTOT	AL of Receipts This Page (optional)			2375.00
	This Period (last page this line number or			5812.60

remized DISBURSEMENTS	Use separate schedule(s) for each category of the		10			NE NUMBER: PAGE 10 /					10/	19		
	Detailed Summary Page		(check only X 21b 27			y one) 22 23 28a 28b				b 24 28c			25 29	\square
for commercial purposes, other than using the na														S
NAME OF COMMITTEE (In Full) WOMENCOUNT PAC														
Full Name (Last, First, Middle Initial) ACTBLUE						Tran Date			urse	eme	EXP.E	3.13	09	
Mailing Address 14 ARROW STREET,	SUITE 11					0 [™] 8	M	/	^D 0	^Б	/	ź	οò	3 [×]
City CAMBRIDGE	State Zip Code MA 02138					Amo	unt c	of E	ach	Dis	sburse	men	t this	Perioc
Purpose of Disbursement FUNDRAISING WEBSITE TRANSACTION FE		00)3]	L		_					3.9	6	
Candidate Name			ate Ty	gory/ pe										
Office Sought: House Disbur Senate President State: District:	Primary General Other (specify) ▼													
Full Name (Last, First, Middle Initial) WELLS FARGO BANK						Tran Date			urse	eme	EXP.E	3.13	12	
Mailing Address 464 CALIFORNIA STREET							M	/	^D 1	^D 2	/	ź	οò	3 [×]
City SAN FRANCISCO	State Zip Code CA 94163					Amount of Each Disbursement this								
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Candidate Name			ate Ty	gory/ pe										
Office Sought: House Disbur Senate President State: District:	esement For: Primary General Other (specify) ▼													
Full Name (Last, First, Middle Initial) WELLS FARGO BANK						Tran Date	of D		urse	eme		3.13	13	
Mailing Address 464 CALIFORNIA STREET						0 8	M	/	^D 1	^D 2	/ \	Ź	0 ò 8	3 [×]
City SAN FRANCISCO	State Zip Code CA 94163					Amo	unt c	of E	ach	Dis	sburse	men	t this	Perioc
Purpose of Disbursement BANKCARD FEE		00	03	1	L							31.6	1	
Candidate Name			ate Ty	gory/ pe	_									
Office Sought: House Disbur Senate President State: District:	Primary General Other (specify) ▼													
SUBTOTAL of Disbursements This Page (optiona	I)				▶								47.5	5
TOTAL This Period (last page this line number on	ly)				▶									

FEC Schedule B (Form 3X) (Revised 02/2003)

ITEMIZED DISBURSEMENTS	NUMBER: PAGE 11/19							
ar for commercial purposes, other than using the name and address of any political committee to solicit contributions from suc NAME OF COMMITTEE (In Full) WOMENCOUNT PAC Full Name (Last, First, Middle Initial) WELLS FARGO BANK Mailing Address 464 CALIFORNIA STREET City SAN FRANCISCO CA 94163 Purpose of Disbursement BANKCARD INTERCHANGE FEE Candidate Name Office Sought: House Disbursement For: President State: District: Full Name (Last, First, Middle Initial) ACTBLUE Mailing Address 14 ARROW STREET, SUITE 11 City Candidate Name Office Sought: House Office Sought: House Disbursement For: Purpose of Disbursement Purpose of Disbursement Purp	4 25 2 8c 29 3							
NAME OF COMMITTEE (In Full) Transaction ID: EXI WOMENCOUNT PAC Full Name (Last, First, Middle Initial) Transaction ID: EXI WELLS FARGO BANK Transaction ID: EXI Date of Disbursement Mailing Address 464 CALIFORNIA STREET 003 City State Zip Code SAN FRANCISCO CA 94163 Purpose of Disbursement 003 Categoryi BANKCARD INTERCHANGE FEE 003 Categoryi Candidate Name Disbursement For: 003 Office Sought: House Disbursement For: President Other (specify) Image: Categoryi Full Name (Last, First, Middle Initial) Acres 14 ARROW STREET, SUITE 11 Mailing Address 14 ARROW STREET, SUITE 11 Image: Categoryi City State Zip Code Candidate Name Disbursement For: 003 Categoryi Transaction ID: EXI Date of Disbursement MA 02138 Purpose of Disbursement Disbursement For: 003 Categoryi Transaction ID: EXI Date of Disbursement Gendidate Name								
WOMENCOUNT PAC Full Name (Last, First, Middle Initial) WELLS FARGO BANK Mailing Address 464 CALIFORNIA STREET City State Zip Code SAN FRANCISCO CA 94163 Purpose of Disbursement 003 BANKCARD INTERCHANGE FEE 003 Candidate Name Other (specify) Office Sought: House State: Disbursement For: State: Disbursement For: State: District: Full Name (Last, First, Middle Initial) Chter (specify) ACTBLUE Transaction ID: EXI Mailing Address 14 ARROW STREET, SUITE 11 City State Zip Code CAMBRIDGE MA 02138 Purpose of Disbursement Primary General Purpose of Disbursement Disbursement For: 003 Cardidate Name Disbursement For: 003 Cardidate Name Disbursement For: 003 Category/ Type Other (specify) Full Name (Last, First, Middle Initial) Chter (specify)								
WELLS FARGO BANK Date of Disbursement Mailing Address 464 CALIFORNIA STREET Image: Disbursement City State Zip Code SAN FRANCISCO CA 94163 Purpose of Disbursement BANKCARD INTERCHANGE FEE 003 Cardidate Name Other (specify) Category/ Office Sought: House Disbursement For: 003 President Other (specify) Category/ Transaction ID: EXI Mailing Address 14 ARROW STREET, SUITE 11 Image: Cardidate Name Mailing Address City State Zip Code Amount of Each Disbursement Purpose of Disbursement Mailing Address 14 ARROW STREET, SUITE 11 Image: Cardidate Name Office Sought: House Disbursement For: 003 Category/ City Senate Disbursement For: 003 Category/ <								
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SÁN FRANCISCO CA 94163 Purpose of Disbursement 003 Candidate Name 003 Candidate Name 003 Office Sought: House President Disbursement For: State: District: Full Name (Last, First, Middle Initial) ACTBLUE ACTBLUE Mailing Address Mailing Address 14 ARROW STREET, SUITE 11 City State Candidate Name 003 Category/ Transaction ID: EXI Date of Disbursement Mailing Address Full Name (Last, First, Middle Initial) ACTBLUE Candidate Name 003 Cardidate Name 003 Candidate Name Disbursement For: Office Sought: House Disbursement For: 003 Cardidate Name Disbursement For: Office Sought: House Disbursement For: 003 Category/ Transaction ID: EXI Disbursement Other (specify) ▼ Full Name (Last, First, Middle Initial) ACTBLUE ACTBLUE	Ý ŽOŎ8Ÿ							
BANKCARD INTERCHANGE FEE 003 Candidate Name Category/ Type Office Sought: House President Disbursement For: President Other (specify) State: District: Full Name (Last, First, Middle Initial) ACTBLUE Mailing Address Mailing Address 14 ARROW STREET, SUITE 11 City State Candidate Name 003 Purpose of Disbursement 003 Purpose of Disbursement Other (specify) Office Sought: House Disbursement For: 003 Candidate Name Disbursement For: Office Sought: House President Disbursement For: Office Sought: House President Other (specify) State: District: Full Name (Last, First, Middle Initial) ACTBLUE Mailing Address Mailing Address 14 ARROW STREET, SUITE 11 City State City State City State City State <td></td>								
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Senate Primary General President Other (specify) Image: Construct of the system of the								
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CÁMBRIDGE MA 02138 Purpose of Disbursement Purpose of Disbursement 003 Candidate Name 003 Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ State: District: Transaction ID: EXI Full Name (Last, First, Middle Initial) ACTBLUE Transaction ID: EXI Mailing Address 14 ARROW STREET, SUITE 11 City State Zip Code CAMBRIDGE MA 02138 Purpose of Disbursement 003 Category/ FUNDRAISING WEBSITE TRANSACTION FEES 003 Category/ Candidate Name 003 Category/	^Y ^Y 2 0 0 8 ^Y							
FUNDRAISING WEBSITE TRANSACTION FEES 003 Candidate Name 003 Candidate Name Category/ Type Office Sought: House Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) ACTBLUE ACTBLUE Transaction ID: EXI Date of Disbursement Mailing Address 14 ARROW STREET, SUITE 11 City State CAMBRIDGE MA Purpose of Disbursement FUNDRAISING WEBSITE TRANSACTION FEES O03 Category/								
Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ State: District: Transaction ID: EXIDA Full Name (Last, First, Middle Initial) ACTBLUE Transaction ID: EXIDate of Disbursement Mailing Address 14 ARROW STREET, SUITE 11 08 M / 20 / 4 Date of Disbursement City State Zip Code Amount of Each Disbursement Purpose of Disbursement MA 02138 Amount of Each Disbursement PUNDRAISING WEBSITE TRANSACTION FEES 003 Category/ Amount of Each Disbursement	9.89							
Senate Primary General President Other (specify) ▼ State: District: Transaction ID: EXI Full Name (Last, First, Middle Initial) ACTBLUE Transaction ID: EXI Mailing Address 14 ARROW STREET, SUITE 11								
Full Name (Last, First, Middle Initial) Transaction ID: EXI ACTBLUE Date of Disbursement Mailing Address 14 ARROW STREET, SUITE 11 City State Zip Code CAMBRIDGE MA 02138 Purpose of Disbursement 003 Candidate Name 003								
ACTBLUE Mailing Address 14 ARROW STREET, SUITE 11 Date of Disbursement Mailing Address 14 ARROW STREET, SUITE 11 0 8 4 7 2 0 7 City State Zip Code CAMBRIDGE MA 02138 Purpose of Disbursement 003 FUNDRAISING WEBSITE TRANSACTION FEES 003 Candidate Name Category/								
City State Zip Code CAMBRIDGE MA 02138 Purpose of Disbursement 003 FUNDRAISING WEBSITE TRANSACTION FEES 003 Candidate Name Category/								
CAMBRIDGE MA 02138 Purpose of Disbursement 003 FUNDRAISING WEBSITE TRANSACTION FEES 003 Candidate Name Category/	Ý ŽOŎ8Ÿ							
FUNDRAISING WEBSITE TRANSACTION FEES 003 Candidate Name Category/								
	117.78							
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼								
State: District:								
SUBTOTAL of Disbursements This Page (optional)	360.75							

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I		PAGE 12/19			
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 27	one) 22 23 28a 28b	24 25 28c 29			
ny Information copied from such Reports and State							
r for commercial purposes, other than using the na	me and address of any political co	mmittee to soli	cit contributions from	such committee			
NAME OF COMMITTEE (In Full) WOMENCOUNT PAC							
Full Name (Last, First, Middle Initial) DAVIS AUDIO VISUAL, LLC			Transaction ID:				
Mailing Address 2100 CLAY STREET	Mailing Address 2100 CLAY STREET						
City DENVER	State Zip Code CO 80211		Amount of Each Di	sbursement this Period			
Purpose of Disbursement EQUIPMENT RENTAL FOR EVENT 8/26		003		1060.18			
Candidate Name		Category/ Type					
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼						
Full Name (Last, First, Middle Initial) OCCASIONS BY SANDY		Transaction ID:	-				
Mailing Address 1789 WEST WARREN		0 ^M 8 ^M / ^D 2 ^D 5	[/] ^Y ^Y ^Y ^Y ^Y ^Y ^Y				
City ENGLEWOOD	StateZip CodeCO80110		Amount of Each Di	sbursement this Period			
Purpose of Disbursement CATERING COST 8/26		003		12949.67			
Candidate Name		Category/ Type					
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼						
Full Name (Last, First, Middle Initial) THE SUTTON LAW FIRM			Transaction ID:				
Mailing Address 150 POST STREET, S	JITE 405		0 ^M 8 ^M / ^D 2 ^D 5	[/] ^Y ^Y ^Y ^Y ^Y ^Y ^Y ^Y			
City SAN FRANCISCO	State Zip Code CA 94108		Amount of Each Di	sbursement this Perio			
Purpose of Disbursement PROFESSIONAL SERVICES		001		5265.99			
Candidate Name		Category/ Type					
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼						
SUBTOTAL of Disbursements This Page (optiona)	······ Þ		19275.84			
TOTAL This Period (last page this line number onl	у)	►		· · · · · ·			
6AN026			FEC Schedule E	3 (Form 3X) (Revised			

FEC Schedule B (Form 3X) (Revised 02/2003)

	50		B (FEC Form	XX)				- 1									~ -	10/1		
			•	•	Use separate schedule(s) (check only				NUMBER: y one)				PAGE 13/19			9		
	11	ITEMIZED DISBURSEMENTS				for each category of the Detailed Summary Page			X	21b	ń	22		23		24		25		26
					Dotallou	Carrin	ary r ago		H	27		28a		28b	H	28c	H	29		30b
			ed from such Reports poses, other than usir																	
	Ν	NAME OF COMM	/ITTEE (In Full)																	
	V	WOMENCOUN	IT PAC																	
	-	Full Name (Last, I	First, Middle Initial)									Trans	acti	on ID	: E	XP.B	.13	60		
Α.	ACTBLUE											Date of Disbursement								
		Mailing Address 14 ARROW STREET, SUITE 11											ž	0 ð 8	Y					
		City		5	State	Zip C	Code					Amou	int of	f Each) Dis	burse	ment	t this P	erioc	3
		CAMBRIDGE			MA	021	38						÷		-				-	
		Purpose of Disbu FUNDRAISING V	rsement VEBSITE TRANSAC	TION FEES	6				003	3		L.			0		1	04.29		
		Candidate Name							ateg	•										
		Office Court		Dieleuwee					Тур	8	_									
		Office Sought:	House Senate	Disburse	ment For: Primary		General													
					,	cify) =														
		State:			Other (spe	sony)	7													
		State:	President District:		Other (spe	ecify)	7													

SUBTOTAL of Disbursements This Page (optional)	•	104.29
TOTAL This Period (last page this line number only)	►	19788.43
FE6AN026		FEC Schedule B (Form 3X) (Revised 02/2003)

		Г		
SCHEDULE D (FE	C Form 3X)		(Use separate	PAGE 14 / 19
DEBTS AND OBLIC	GATIONS		schedule(s) for each	FOR LINE NUMBER: (check only one) 9
			numbered line)	(check only one) 9 X 10
Excluding Loans	E (In Full)			
WOMENCOUNT PA				
A. Full Name (Last	, First, Middle Initial) of Debt	or or Creditor	Nature of D	ebt (Purpose):
DAVIS AUDIO VI			EQUIPME	
	,		8/26	
Mailing Address 2	100 CLAY STREET			
City	State	ZIP Code		
DENVER	CO	80211		
Outstanding Bala	nce Beginning This Period		Tra	nsaction ID: PAY:D:1385
	0.00			
	0.00			
Amount In	curred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
	350.09	0.00		350.09
B. Full Name (Last	, First, Middle Initial) of Debt	or or Creditor	Nature of D	ebt (Purpose):
THE SUTTON LA				SIONAL SERVICES
Mailing Address 1	50 POST STREET, SUI	TE 405		
City	State	ZIP Code		
SAN FRANCISCO	O CA	94108		
Outstanding Bala	nce Beginning This Period		Tra	nsaction ID: PAY:D:1323
Outstanding Bala			Tra	nsaction ID: PAY:D:1323
Outstanding Bala	nce Beginning This Period 5265.99		-	
		Payment This Period	-	nsaction ID: PAY:D:1323
	5265.99	Payment This Period 5265.99	-	ng Balance at Close of This Period
	5265.99 Icurred This Period		-	
Amount In	5265.99 Incurred This Period 0.00	5265.99	Outstandi	ng Balance at Close of This Period
Amount In	5265.99 Incurred This Period 0.00 , First, Middle Initial) of Debt	5265.99	Outstandin Nature of D	ng Balance at Close of This Period
Amount In C. Full Name (Last,	5265.99 Incurred This Period 0.00 , First, Middle Initial) of Debt	5265.99	Outstandin Nature of D	ng Balance at Close of This Period 0.00 ebt (Purpose):
Amount In C. Full Name (Last, THE SUTTON LA	5265.99 Incurred This Period 0.00 , First, Middle Initial) of Debt	5265.99 or or Creditor	Outstandin Nature of D	ng Balance at Close of This Period 0.00 ebt (Purpose):
Amount In C. Full Name (Last, THE SUTTON LA Mailing Address 1	5265.99 Incurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI	or or Creditor TE 405	Outstandin Nature of D	ng Balance at Close of This Period 0.00 ebt (Purpose):
Amount In C. Full Name (Last, THE SUTTON LA Mailing Address 19 City	5265.99 Incurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI	or or Creditor TE 405 ZIP Code	Outstandin Nature of D	ng Balance at Close of This Period 0.00 ebt (Purpose):
C. Full Name (Last THE SUTTON LA Mailing Address 1 City SAN FRANCISCO	5265.99 Icurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI State O CA	or or Creditor TE 405	Outstandin Nature of D	ng Balance at Close of This Period 0.00 ebt (Purpose):
C. Full Name (Last THE SUTTON LA Mailing Address 1 City SAN FRANCISCO	5265.99 Incurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI	or or Creditor TE 405 ZIP Code	Outstandin Nature of D PROFESS	ng Balance at Close of This Period 0.00 ebt (Purpose):
C. Full Name (Last THE SUTTON LA Mailing Address 1 City SAN FRANCISCO	5265.99 Icurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI State O CA	or or Creditor TE 405 ZIP Code	Outstandin Nature of D PROFESS	ng Balance at Close of This Period 0.00 ebt (Purpose): SIONAL SERVICES
Amount In C. Full Name (Last, THE SUTTON LA Mailing Address 19 City SAN FRANCISCO Outstanding Bala	5265.99 Incurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI State O CA Ince Beginning This Period 0.00	or or Creditor TE 405 ZIP Code 94108	Outstandin Nature of D PROFESS	ng Balance at Close of This Period 0.00 ebt (Purpose): SIONAL SERVICES
Amount In C. Full Name (Last, THE SUTTON LA Mailing Address 19 City SAN FRANCISCO Outstanding Bala	5265.99 Incurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI State O CA Ince Beginning This Period	or or Creditor TE 405 ZIP Code	Outstandin Nature of D PROFESS	ng Balance at Close of This Period 0.00 ebt (Purpose): SIONAL SERVICES
Amount In C. Full Name (Last, THE SUTTON LA Mailing Address 19 City SAN FRANCISCO Outstanding Bala	5265.99 Incurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI State O CA Ince Beginning This Period 0.00	or or Creditor TE 405 ZIP Code 94108	Outstandin Nature of D PROFESS	ng Balance at Close of This Period 0.00 ebt (Purpose): SIONAL SERVICES
Amount In C. Full Name (Last, THE SUTTON LA Mailing Address 19 City SAN FRANCISCO Outstanding Bala	5265.99 Incurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI State O CA Ince Beginning This Period 0.00 Incurred This Period	5265.99 or or Creditor TE 405 ZIP Code 94108 Payment This Period	Outstandin Nature of D PROFESS	ng Balance at Close of This Period 0.00 ebt (Purpose): SIONAL SERVICES
Amount In C. Full Name (Last, THE SUTTON LA Mailing Address 19 City SAN FRANCISCO Outstanding Bala	5265.99 Incurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI State O CA Ince Beginning This Period 0.00 Incurred This Period	5265.99 or or Creditor TE 405 ZIP Code 94108 Payment This Period	Outstandin Nature of D PROFESS	ng Balance at Close of This Period 0.00 ebt (Purpose): SIONAL SERVICES nsaction ID: PAY:D:1383 ng Balance at Close of This Period 2604.66
Amount In C. Full Name (Last, THE SUTTON LA Mailing Address 11 City SAN FRANCISCO Outstanding Balan Amount In	5265.99 acurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI State O CA nce Beginning This Period 0.00 acurred This Period 2604.66	5265.99 or or Creditor TE 405 ZIP Code 94108 Payment This Period	Outstandin Nature of D PROFESS	ng Balance at Close of This Period 0.00 ebt (Purpose): SIONAL SERVICES
Amount In C. Full Name (Last, THE SUTTON LA Mailing Address 19 City SAN FRANCISCO Outstanding Balan Amount In 1) SUBTOTALS This	5265.99 Acurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI State O CA nce Beginning This Period 0.00 Acurred This Period 2604.66 S Period This Page (optional)	or or Creditor TE 405 ZIP Code 94108 Payment This Period	Outstandin Nature of D PROFESS	ng Balance at Close of This Period 0.00 ebt (Purpose): SIONAL SERVICES nsaction ID: PAY:D:1383 ng Balance at Close of This Period 2604.66 2954.75
Amount In C. Full Name (Last, THE SUTTON LA Mailing Address 19 City SAN FRANCISCO Outstanding Balan Amount In 1) SUBTOTALS This	5265.99 Acurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI State O CA nce Beginning This Period 0.00 Acurred This Period 2604.66 S Period This Page (optional)	or or Creditor TE 405 ZIP Code 94108 Payment This Period 0.00	Outstandin Nature of D PROFESS	ng Balance at Close of This Period 0.00 ebt (Purpose): SIONAL SERVICES nsaction ID: PAY:D:1383 ng Balance at Close of This Period 2604.66
Amount In C. Full Name (Last, THE SUTTON LA Mailing Address 11 City SAN FRANCISCO Outstanding Bala Amount In Amount In T) SUBTOTALS This 2) TOTALS This Period	5265.99 Acurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI State O CA nce Beginning This Period 0.00 Acurred This Period 2604.66 as Period This Page (optional) pod (last page this line number	5265.99 or or Creditor TE 405 ZIP Code 94108 Payment This Period 0.00 or only)	Outstandin Nature of D PROFESS	ng Balance at Close of This Period 0.00 ebt (Purpose): SIONAL SERVICES nsaction ID: PAY:D:1383 ng Balance at Close of This Period 2604.66 2954.75 2954.75
Amount In C. Full Name (Last, THE SUTTON LA Mailing Address 19 City SAN FRANCISCO Outstanding Balan Amount In 1) SUBTOTALS This	5265.99 Acurred This Period 0.00 , First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI State O CA nce Beginning This Period 0.00 Acurred This Period 2604.66 as Period This Page (optional) pod (last page this line number	or or Creditor TE 405 ZIP Code 94108 Payment This Period	Outstandin Nature of D PROFESS	ng Balance at Close of This Period 0.00 ebt (Purpose): SIONAL SERVICES nsaction ID: PAY:D:1383 ng Balance at Close of This Period 2604.66 2954.75
Amount In Amount In C. Full Name (Last, THE SUTTON LA Mailing Address 19 City SAN FRANCISCO Outstanding Bala Outstanding Bala Amount In 1) SUBTOTALS This 2) TOTALS This Period 3) TOTAL OUTSTAND	5265.99 Incurred This Period 0.00 First, Middle Initial) of Debt AW FIRM 50 POST STREET, SUI State O CA Ince Beginning This Period 0.00 Incurred This Period 2604.66 Se Period This Page (optional) od (last page this line number DING LOANS from Scher	5265.99 or or Creditor TE 405 ZIP Code 94108 Payment This Period 0.00 or only)	Outstandin Nature of D PROFESS	ng Balance at Close of This Period 0.00 ebt (Purpose): SIONAL SERVICES nsaction ID: PAY:D:1383 ng Balance at Close of This Period 2604.66 2954.75 2954.75

FEC Schedule D (Form 3X) (Revised 02/2003)

Form/Schedule:**SA11AI** Transaction ID: **INC.A.1355** RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11 CAMBRIDGE, MA 02138

Form/Schedule:**SA11AI** Transaction ID: **INC.A.1325** RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11 CAMBRIDGE, MA 02138

Form/Schedule:**SA11AI** Transaction ID: **INC.A.1324** RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11 CAMBRIDGE, MA 02138

Form/Schedule:**SA11AI** Transaction ID: **INC.A.1343** RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11 CAMBRIDGE, MA 02138

Form/Schedule:**SA11AI** Transaction ID: **INC.A.1321** RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11 CAMBRIDGE, MA 02138