

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Women In Leadership PAC-Federal

ADDRESS (number and street) 2003 Yacht Resolute

Check if different than previously reported. (ACC)

Newport Beach CA 92660

2. **FEC IDENTIFICATION NUMBER** C00283432

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

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

<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 type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on _____ in the State of _____

(d) 30-Day **Post -Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on _____ in the State of _____

5. Covering Period 01 01 2009 through 06 30 2009

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 Jeanette Miller

Signature of Treasurer Electronically Filed by Jeanette Miller Date 01 21 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Women In Leadership PAC-Federal

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		815.64
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	815.64									
(c) Total Receipts (from Line 19)	10449.00	10449.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	11264.64	11264.64								
7. Total Disbursements (from Line 31)	6394.25	6394.25								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4870.39	4870.39								
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)	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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Women In Leadership PAC-Federal

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2792.00	2792.00
(ii) Unitemized	7532.00	7532.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10324.00	10324.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	125.00	125.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	10449.00	10449.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10449.00	10449.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10449.00	10449.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	5394.25	5394.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	5394.25	5394.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6394.25	6394.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6394.25	6394.25

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	10449.00	10449.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10449.00	10449.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5394.25	5394.25
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5394.25	5394.25

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Women In Leadership PAC-Federal

A. Full Name (Last, First, Middle Initial)
Nancy Dahan

Mailing Address 3419 Via Lido #369

City State Zip Code
Newport Beach CA 92663

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

Name of Employer Occupation
Brown & Dahan Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: SA11ai00000000656190

Amount of Each Receipt this Period
350.00

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

Mailing Address 7 Terraza Del Mar

City State Zip Code
Dana Point CA 92629

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

Name of Employer Occupation
CH2M Hill Project Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: SA11ai00000000656183

Amount of Each Receipt this Period
250.00

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

Mailing Address 22 Perkins Ct

City State Zip Code
Irvine CA 92617

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

Name of Employer Occupation
UCI Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2009

Transaction ID: SA11ai00000000656271

Amount of Each Receipt this Period
250.00

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: PAGE 7 / 17
	(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)
Women In Leadership PAC-Federal

A.	Full Name (Last, First, Middle Initial) Nora Lehman	Date of Receipt MM / DD / YYYY 04 / 04 / 2009
	Mailing Address 734 Via Lido Soud	Transaction ID: SA11ai00000000656249
	City State Zip Code Newport Beach CA 92663	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 385.00	

B.	Full Name (Last, First, Middle Initial) Nora Lehman	Date of Receipt MM / DD / YYYY 06 / 04 / 2009
	Mailing Address 734 Via Lido Soud	Transaction ID: SA11ai00000000656293
	City State Zip Code Newport Beach CA 92663	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 385.00	

C.	Full Name (Last, First, Middle Initial) Elizabeth D Parker	Date of Receipt MM / DD / YYYY 05 / 06 / 2009
	Mailing Address 307 Colleen Pl	Transaction ID: SA11ai00000000656277
	City State Zip Code Costa Mesa CA 92627	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Public Health Foundation Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 372.00	

SUBTOTAL of Receipts This Page (optional)	435.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Women In Leadership PAC-Federal

A.	Full Name (Last, First, Middle Initial) Elizabeth D Parker		Date of Receipt	
	Mailing Address 307 Colleen PI		M M / D D / Y Y Y Y Y 05 / 06 / 2009	
	City	State	Zip Code	Transaction ID: SA11ai00000000656278
	Costa Mesa	CA	92627	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		100.00	
Name of Employer Public Health Foundation		Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 372.00		

B.	Full Name (Last, First, Middle Initial) Elizabeth D Parker		Date of Receipt	
	Mailing Address 307 Colleen PI		M M / D D / Y Y Y Y Y 01 / 15 / 2009	
	City	State	Zip Code	Transaction ID: SA11ai00000000656170
	Costa Mesa	CA	92627	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		100.00	
Name of Employer Public Health Foundation		Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 372.00		

C.	Full Name (Last, First, Middle Initial) Elizabeth D Parker		Date of Receipt	
	Mailing Address 307 Colleen PI		M M / D D / Y Y Y Y Y 02 / 23 / 2009	
	City	State	Zip Code	Transaction ID: SA11ai00000000690987
	Costa Mesa	CA	92627	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		22.00	
Name of Employer Public Health Foundation		Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 372.00		

SUBTOTAL of Receipts This Page (optional)	▶	222.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 17

(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)
Women In Leadership PAC-Federal

A.

Full Name (Last, First, Middle Initial)
Elizabeth D Parker

Mailing Address 307 Colleen PI

City State Zip Code
Costa Mesa CA 92627

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Public Health Foundation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.00

Date of Receipt 01 / 15 / 2009

Transaction ID: SA11ai00000000656169

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Judith B Rosener

Mailing Address 125 Via Venezia

City State Zip Code
Newport Beach CA 92663

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
UC Irvine Professor Emeritus

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 03 / 10 / 2009

Transaction ID: SA11ai00000000656224

Amount of Each Receipt this Period 70.00

C.

Full Name (Last, First, Middle Initial)
Judith B Rosener

Mailing Address 125 Via Venezia

City State Zip Code
Newport Beach CA 92663

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
UC Irvine Professor Emeritus

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 06 / 04 / 2009

Transaction ID: SA11ai00000000656295

Amount of Each Receipt this Period 350.00

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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 10 / 17
	<input checked="" 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)
Women In Leadership PAC-Federal

A.	Full Name (Last, First, Middle Initial) Patricia Ann Schuler		Date of Receipt
	Mailing Address 200 Mc Neil #108		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Newport Beach	CA	92663
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: SA11ai00000000690986
Name of Employer New England Financial		Occupation Financial Advisor	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"/> 25.00
		<input type="text"/> 415.00	

B.	Full Name (Last, First, Middle Initial) Patricia Ann Schuler		Date of Receipt
	Mailing Address 200 Mc Neil #108		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Newport Beach	CA	92663
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: SA11ai00000000656175
Name of Employer New England Financial		Occupation Financial Advisor	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"/> 350.00
		<input type="text"/> 415.00	

C.	Full Name (Last, First, Middle Initial) Patricia Ann Schuler		Date of Receipt
	Mailing Address 200 Mc Neil #108		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Newport Beach	CA	92663
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: SA11ai00000000656223
Name of Employer New England Financial		Occupation Financial Advisor	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"/> 40.00
		<input type="text"/> 415.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 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:		PAGE 11 / 17	
	(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"/> 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)
Women In Leadership PAC-Federal

A.

Full Name (Last, First, Middle Initial) Sandra L Wright		Date of Receipt	
Mailing Address 804 W Ocean Front		M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 9	
City	State	Zip Code	Transaction ID: SA11ai00000000690990
Newport Beach	CA	92661	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		350.00	
Name of Employer N/A	Occupation Retired	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		350.00	

SUBTOTAL of Receipts This Page (optional)	350.00
TOTAL This Period (last page this line number only)	2792.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 17
	(check only one)	
<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)
Women In Leadership PAC-Federal

A.	Full Name (Last, First, Middle Initial) Committee To Re-Elect Loretta Sanchez		Date of Receipt
	Mailing Address 1212 S Victory Bl		<input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Burbank	CA	91502
	FEC ID number of contributing federal political committee.		<input type="text" value="C00326264"/>
Name of Employer		Occupation	Transaction ID: SA11c00000000656279
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="125.00"/>	
<input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="125.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="125.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="125.00"/>

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)

PAGE 13 / 17

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

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NAME OF COMMITTEE (In Full)
Women In Leadership PAC-Federal

A. Full Name (Last, First, Middle Initial) Gibson Dunn & Crutcher <hr/> Mailing Address Four Park Plaza, Jamboree Center <hr/> City Irvine State CA Zip Code 92614 <hr/> Purpose of Disbursement Board Meeting Candidate Name <hr/> 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) ▼	Transaction ID: SB21b00000000655053 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 9
	Amount of Each Disbursement this Period 142.24
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Gibson Dunn & Crutcher <hr/> Mailing Address Four Park Plaza, Jamboree Center <hr/> City Irvine State CA Zip Code 92614 <hr/> Purpose of Disbursement Board Meeting Candidate Name <hr/> 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) ▼	Transaction ID: SB21b00000000655055 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 142.24
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) MemberClick's Inc <hr/> Mailing Address 2970 Peachtree Rd #300 <hr/> City Atlanta State GA Zip Code 30305 <hr/> Purpose of Disbursement Web Maintenance Candidate Name <hr/> 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) ▼	Transaction ID: SB21b00000000655051 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 9
	Amount of Each Disbursement this Period 140.40
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

424.88

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)
Women In Leadership PAC-Federal

A. Full Name (Last, First, Middle Initial) MemberClick's Inc <hr/> Mailing Address 2970 Peachtree Rd #300 <hr/> City Atlanta State GA Zip Code 30305 <hr/> Purpose of Disbursement Web Maintenance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21b00000000655056 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9
	Amount of Each Disbursement this Period 147.42
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) MemberClick's Inc <hr/> Mailing Address 2970 Peachtree Rd #300 <hr/> City Atlanta State GA Zip Code 30305 <hr/> Purpose of Disbursement Web Maintenance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21b00000000655493 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 147.42
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) MemberClick's Inc <hr/> Mailing Address 2970 Peachtree Rd #300 <hr/> City Atlanta State GA Zip Code 30305 <hr/> Purpose of Disbursement Web Maintenance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21b00000000655494 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 15.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

309.84

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)
Women In Leadership PAC-Federal

<p>A.</p> <p>Full Name (Last, First, Middle Initial) MemberClick's Inc</p> <p>Mailing Address 2970 Peachtree Rd #300</p> <p>City Atlanta State GA Zip Code 30305</p> <p>Purpose of Disbursement Web Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21b00000000655496</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="169.72"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) MemberClick's Inc</p> <p>Mailing Address 2970 Peachtree Rd #300</p> <p>City Atlanta State GA Zip Code 30305</p> <p>Purpose of Disbursement Web Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21b00000000655498</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="162.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) MemberClick's Inc</p> <p>Mailing Address 2970 Peachtree Rd #300</p> <p>City Atlanta State GA Zip Code 30305</p> <p>Purpose of Disbursement Web Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21b00000000655501</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="163.43"/></p>

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)

PAGE 16 / 17

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

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NAME OF COMMITTEE (In Full)
Women In Leadership PAC-Federal

A. Full Name (Last, First, Middle Initial) Super Dave Mailing Address 1927 E Deer Av City Santa Ana State CA Zip Code 92705 Purpose of Disbursement Non Advocacy Printing 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) ▼	Transaction ID: SB21b00000000655054 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 578.08 Category/Type 001
B. Full Name (Last, First, Middle Initial) UCI University Club Mailing Address 801 E Peltason City Irvine State CA Zip Code 92697 Purpose of Disbursement Catering & Venue for Meeting 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) ▼	Transaction ID: SB21b00000000655123 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 3454.86 Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ►

4032.94

TOTAL This Period (last page this line number only) ►

5262.81

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 17

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

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NAME OF COMMITTEE (In Full)
Women In Leadership PAC-Federal

A.

Full Name (Last, First, Middle Initial)
Beth Krom For Congress

Transaction ID: SB23000000000655122

Date of Disbursement

Mailing Address 1212 S Victory Bl

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	9

City Burbank State CA Zip Code 91502

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name
Beth Krom

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 48

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

TOTAL This Period (last page this line number only) ►

1000.00
