

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER 2015 AUG -7 AM 7:45

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines: 12FE4M5

PROGRESSIVE WOMENS ALLIANCE OF WEST MICHIGAN

ADDRESS (number and street)

P.O. BOX 11315

Check if different than previously reported. (ACC)

GRAND RAPIDS MI 49501

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00400432

3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

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

Election on [MM/DD/YYYY] in the State of [State]

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

Election on [MM/DD/YYYY] in the State of [State]

5. Covering Period 01/01/2015 through 06/30/2015

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 Kathleen Ley-Bruinisma

Signature of Treasurer [Handwritten Signature]

Date 07/26/2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Report Covering the Period: From:

MM / DD / YYYY  
01 / 01 / 2015

To:

MM / DD / YYYY  
06 / 30 / 2015

4 4 2 1 2 1 4 T 2 3 W 4 0 3 7 4 8 1 1 1 A 2 4 3 M 3 4 3 0 1 2 2 3 2 0 1 5

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">2015</span>	2181 2080	<span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px;"></span>
(b) Cash on Hand at Beginning of Reporting Period.....		<span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px; text-align: center;">5392</span>
(c) Total Receipts (from Line 19).....		<span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px; text-align: center;">0</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....		<span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px; text-align: center;">5392</span>
7. Total Disbursements (from Line 31).....		<span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px; text-align: center;">0</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....		<span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px; text-align: center;">5392</span>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		<span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px; text-align: center;"><del>3500.00</del></span>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		<span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px; text-align: center;">3500.00</span>

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Progressive Women's Alliance of West Michigan

Report Covering the Period: From: 01 / 01 / 2015 To: 06 / 30 / 2015

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

	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).....	0	0
(ii) Unitemized .....	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....	0	0
(b) Political Party Committees .....	6	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0	0
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5).....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....	0	0
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....	0	0

UNIVERSITY MICROFILMS

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

**II. Disbursements**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	0
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (52 U.S.C. § 30103(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0	0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	0	0

DUPLICATE COPY TO BE FILED WITH ORIGINAL

**DETAILED SUMMARY PAGE  
of Disbursements**

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) .....	0	0
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0	0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0	0

NON-PROFIT ORGANIZATION

00.0026  
00.0028

LOANS

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

PAGE OF FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Progressive Women's Alliance of West Michigan

LOAN SOURCE Full Name (Last, First, Middle Initial)

Joan Bowman

Election:

- Primary
General
Other (specify)

Mailing Address

220 W. Saginaw Highway #A-6

City Grand Ledge State MI ZIP Code 48837

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

3500.00

0

3500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

01 / 20 / 2005

% (apr)

Yes No

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

Table with 4 rows for endorsers/guarantors. Columns include: Full Name, Mailing Address, City, State, ZIP Code, Name of Employer, Occupation, Amount Guaranteed Outstanding.

SUBTOTALS This Period This Page (optional)

3500.00

TOTALS This Period (last page in this line only)

3500.00

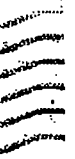
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

012345678910111213141516171819202122232425262728293031323334353637383940414243444546474849505152535455565758596061626364656667686970717273747576777879808182838485868788899091929394959697989900

PO Box 1315  
Grand Rapids 49501

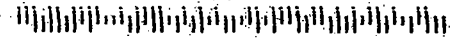
GRAND RAPIDS MI 49501

21 JUL 2015 PM 21



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

20463



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*MP* 8/7/15  
 PREPARER DATE PREPARED

20150807 10:00:00 AM