

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2008 JUL 18 PM 12:32
Office Use Only

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

FEMINIST MAJORITY PAC

ADDRESS (number and street) 11600 WILSON BLVD.
SUITE 801
 Check if different than previously reported. (ACC) ARLINGTON VA 22209

2. **FEC IDENTIFICATION NUMBER ▼** C00377168 **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:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) 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 07 / 01 / 2008 through 06 / 30 / 2008

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 ELEANOR SMEAL, ASSISTANT TREASURER

Signature of Treasurer Eleanor Smear Date 07 / 15 / 2008

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

28039790264

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

FEMINIST MAJORITY PAC

Report Covering the Period: From: 04 01 2008 To: 06 30 2008

28039790265

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2008</u>		5,105.50
(b) Cash on Hand at Beginning of Reporting Period.....	9,728.00	
(c) Total Receipts (from Line 19)	11,019.50	21,494.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	20,747.50	26,600.00
7. Total Disbursements (from Line 31).....	7,786.83	13,635.33
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	12,960.67	12,964.67
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

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

FEMINIST MAJORITY PAC

Report Covering the Period: From:

04 01 2008

To:

06 30 2008

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).....

1,420.00

11,420.00

(ii) Unitemized.....

9,999.50

9,974.50

(iii) TOTAL (add
Lines 11(a)(i) and (ii)).....▶

10,919.50

21,394.50

(b) Political Party Committees.....

0

0

(c) Other Political Committees
(such as PACs).....

100.00

100.00

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5).....▶

11,019.50

21,494.50

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)).....▶

11,019.50

21,494.50

20. Total Federal Receipts
(subtract Line 18(c) from Line 19).....▶

11,019.50

21,494.50

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DETAILED SUMMARY PAGE
of Disbursements

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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	6,786.83	7,135.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6,786.83	7,135.33
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1,000.00	6,500.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 (2 U.S.C. §431(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))..	7,786.83	13,635.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7,786.83	13,635.33

DETAILED SUMMARY PAGE
of Disbursements

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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)	11,019.50	21,494.50
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11,019.50	21,494.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6,786.83	7,135.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4,232.67	14,359.17

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

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

FOR LINE NUMBER: PAGE 6 OF 10
(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)
FEMINIST MAJORITY PAC

A. Full Name (Last, First, Middle Initial)
CURTIS, HOPE

Mailing Address
P.O. Box 4023

City SANTA FE, NM State 8 Zip Code 7502

FEC ID number of contributing federal political committee. C

Name of Employer _____ Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
05 ' 29 ' 2008

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
HOROWITZ, NATALINE D

Mailing Address
77 MIDDLE ROAD, APT. 260

City BRYN MAWR, PA State PA Zip Code 19010

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
06 ' 03 ' 2008

Amount of Each Receipt this Period
400.00

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

Mailing Address
932 FRANKLIN ST.

City WYOMISSING, PA State PA Zip Code 19610

FEC ID number of contributing federal political committee. C

Name of Employer _____ Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt
05 ' 30 ' 2008

Amount of Each Receipt this Period
470.00

SUBTOTAL of Receipts This Page (optional) ▶ 1170.00

TOTAL This Period (last page this line number only) ▶ 1170.00

28039790269

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE <u>7</u> OF <u>10</u>	
	<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)
FEMINIST MAJORITY PAC

A. Full Name (Last, First, Middle Initial)
MIEDZIAN, MYRIAM

Mailing Address
170 E. 83RD STREET

City **NEW YORK, NY** State **NY** Zip Code **10028**

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 / 24 / 2008

Amount of Each Receipt this Period
250.00

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 _____

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 _____

Amount of Each Receipt this Period _____

SUBTOTAL of Receipts This Page (optional) ▶ **250.00**

TOTAL This Period (last page this line number only) ▶ **1420.00**

28039790270

**SCHEDULE 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 8 OF 10

<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)
FEMINIST MAJORITY PAC

A.

Full Name (Last, First, Middle Initial)
NEUHARDT FOR CONGRESS

Mailing Address
43 SOUTH FOUNTAIN AVE

City Springfield State OH Zip Code 45502

Purpose of Disbursement
CONTRIBUTION

Candidate Name
SHAREN SWARZ-NEUHARDT

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: OH District: 7

Date of Disbursement
06' 30' 2008

Amount of Each Disbursement this Period
1000.00

Category/Type
011

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

Amount of Each Disbursement this Period

Category/Type

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

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional).....▶ 1000.00

TOTAL This Period (last page this line number only).....▶ 1000.00

28039790271

**SCHEDULE 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 <u>9</u> OF <u>10</u>
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

A. Full Name (Last, First, Middle Initial) <u>FEMINIST MAJORITY FOUNDATION</u>		Date of Disbursement <u>06</u> / <u>09</u> / <u>2008</u>
Mailing Address <u>1600 WILSON BLVD. #801</u>		Amount of Each Disbursement this Period <u>2324.00</u>
City <u>ARLINGTON, VA</u>	State <u>VA</u> Zip Code <u>22209</u>	
Purpose of Disbursement <u>LIST RENTAL</u>	Candidate Name <u>LIST RENTAL</u>	003 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:		

B. Full Name (Last, First, Middle Initial) <u>FEMINIST MAJORITY</u>		Date of Disbursement <u>06</u> / <u>09</u> / <u>2008</u>
Mailing Address <u>1600 WILSON BLVD. #801</u>		Amount of Each Disbursement this Period <u>1090.00</u>
City <u>ARLINGTON, VA</u>	State <u>VA</u> Zip Code <u>22209</u>	
Purpose of Disbursement <u>LIST RENTAL</u>	Candidate Name <u>LIST RENTAL</u>	003 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:		

C. Full Name (Last, First, Middle Initial) <u>US POSTAL SERVICE</u>		Date of Disbursement <u>05</u> / <u>14</u> / <u>2008</u>
Mailing Address <u>900 BRENTWOOD, NE</u>		Amount of Each Disbursement this Period <u>934.18</u>
City <u>WASHINGTON, DC</u>	State <u>DC</u> Zip Code <u>20090</u>	
Purpose of Disbursement <u>POSTAGE FOR MAILING</u>	Candidate Name <u>POSTAGE FOR MAILING</u>	003 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).....▶	<u>4348.18</u>
TOTAL This Period (last page this line number only).....▶	

28039790272

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A.		Date of Disbursement	
Mailing Address <i>US POSTAL SERVICE</i> <i>900 BRENTWOOD, NE</i>		<input type="text" value="05"/> <input type="text" value="19"/> <input type="text" value="2008"/>	
City <i>WASHINGTON</i>		State <i>DC</i>	
Zip Code <i>20090</i>		Amount of Each Disbursement this Period	
Purpose of Disbursement <i>POSTAGE FOR MAILING</i>		<input type="text" value="003"/>	
Candidate Name 		<input type="text" value="2189.75"/>	
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: _____	

B.		Date of Disbursement	
Mailing Address		<input type="text" value="MM"/> <input type="text" value="DD"/> <input type="text" value="YYYY"/>	
City		State	
Zip Code		Amount of Each Disbursement this Period	
Purpose of Disbursement		<input type="text" value=""/>	
Candidate Name		<input type="text" value=""/>	
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: _____	

C.		Date of Disbursement	
Mailing Address		<input type="text" value="MM"/> <input type="text" value="DD"/> <input type="text" value="YYYY"/>	
City		State	
Zip Code		Amount of Each Disbursement this Period	
Purpose of Disbursement		<input type="text" value=""/>	
Candidate Name		<input type="text" value=""/>	
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).....▶

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

2189.75
6537.93

28039790273

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FedEx</i>	Shipping Date <i>7/15/08</i>
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JmB
 PREPARER
 (3/2005)

7/18/08
 DATE PREPARED

28039790274