

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

WOMENCOUNT PAC

ADDRESS (number and street)

393 7TH AVENUE, SUITE 301

Check if different
than previously
reported. (ACC)

SAN FRANCISCO

CA

94118

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00450098

3. IS THIS
REPORTNEW
(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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

MASON, STACY, , ,

Type or Print Name of Treasurer

Signature of Treasurer

MASON, STACY, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

WOMENCOUNT PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
12 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2017

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|--|---|
| 6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2017 | | 4706.06 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 7442.29 | |
| (c) Total Receipts (from Line 19) | 43790.60 | 525880.50 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 51232.89 | 530586.56 |
| 7. Total Disbursements (from Line 31) | 23505.43 | 502859.10 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 27727.46 | 27727.46 |
| 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) | 16661.25 | |

☒ 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. 05/2016)

Page 3

Write or Type Committee Name

WOMENCOUNT PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 12 / 01 / 2017

To:

 M M / D D / Y Y Y Y Y
 12 / 31 / 2017
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).....

42655.00

506457.43

(ii) Unitemized

331.00

331.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

42986.00

506788.43

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

802.60

18150.75

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

43788.60

524939.18

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

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

2.00

941.32

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 Transfers (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))

43790.60

525880.50

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

43790.60

525880.50

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

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 | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 890.43 | 23410.76 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 890.43 | 23410.76 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 20065.00 | 453490.80 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 | 2500.00 | 2772.70 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 15.09 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 2500.00 | 2787.79 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 50.00 | 23169.75 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 23505.43 | 502859.10 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 23505.43 | 502859.10 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) | 43788.60 | 524939.18 |
| 34. Total Contribution Refunds (from Line 28(d)) | 2500.00 | 2787.79 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 41288.60 | 522151.39 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ | 890.43 | 23410.76 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36)▶ | 890.43 | 23410.76 |

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F3XA
Transaction ID :

UPDATE OTHER FEDERAL RECEIPTS AND EARMARKED CONTRIBUTIONS

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 109

(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 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COXE, SIMONE, , ,

Mailing Address 1401 EMERSON ST

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 04 | / | 2017 |

Transaction ID : INCA16428

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KLEIN, SHERYL, , ,

Mailing Address 576 EAST CRESCENT DRIVE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
REAL ESTATE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 06 | / | 2017 |

Transaction ID : INCA16427

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAUDER, GARY, , ,

Mailing Address 88 MERCEDES LN

City

ATHERTON

State

CA

Zip Code

94027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LAUDER PARTNERS, LLCOccupation (for Individual)
VENTURE CAPITALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3700.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 06 | / | 2017 |

Transaction ID : INCA16384

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DIBRIENZA, JENNIFER, , ,

Mailing Address 186 PARK AVE

City

PALO ALTO

State

CA

Zip Code

94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2017

Transaction ID : INCA16433

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAHN, ELAINE, , ,

Mailing Address 465 MELVILLE AVE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

COMMUNITY VOLUNTEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2017

Transaction ID : INCA16425

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUNT-SCOTT, SHANNON, , ,

Mailing Address 16348 AZTEC RIDGE DR

City

LOS GATOS

State

CA

Zip Code

95030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

THE SCOTT FOUNDATION

Occupation (for Individual)

PRESIDENT AND CO-FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11479.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2017

Transaction ID : INCA16444

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

2500.00

TOTAL This Period (last page this line number 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 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HYATT, SUSAN, , ,

Mailing Address 42 TUSCALOOSA AVENUE

City
ATHERTON

State
CA

Zip Code
94027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
COMMUNITY VOLUNTEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 07 / 2017

Transaction ID : INCA16383

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, KATHARINE, , ,

Mailing Address 849 LINCOLN AVE.

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 07 / 2017

Transaction ID : INCA16424

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RAO, AMY, , ,

Mailing Address 228 SEALE AVE.

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IAS

Occupation (for Individual)
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 07 / 2017

Transaction ID : INCA16426

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

5750.00

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

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

FOR LINE NUMBER: PAGE 10 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANDS, SARAH, , ,

Mailing Address 1331 HAMILTON AVE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

NOT EMPLOYED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2017

Transaction ID : INCA16423

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLE KOHLBERG, SUZANNE, , ,

Mailing Address 63 LOS TRANCOS

City

PORTOLA VALLEY

State

CA

Zip Code

94028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

ARCHITECT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 08 / 2017

Transaction ID : INCA16388

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRAHN, ANNE, , ,

Mailing Address 1125 UNIVERSITY AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

NOT EMPLOYED

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

5750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 08 / 2017

Transaction ID : INCA16421

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

850.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 109

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANDLER, FROMA, , ,

Mailing Address 12500 PARK POTOMAC AVE 307N

City
POTOMAC

State
MD

Zip Code
20854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
BOWS ETC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 08 / 2017

Transaction ID : INCA16329

Amount of Each Receipt this Period

12.50

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANDLER, FROMA, , ,

Mailing Address 12500 PARK POTOMAC AVE 307N

City
POTOMAC

State
MD

Zip Code
20854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
BOWS ETC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 08 / 2017

Transaction ID : INCA16335

Amount of Each Receipt this Period

12.50

☐ Memo Item

ERMK: LISA MANDELBLATT FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SANDLER, FROMA, , ,

Mailing Address 12500 PARK POTOMAC AVE 307N

City
POTOMAC

State
MD

Zip Code
20854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
BOWS ETC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 08 / 2017

Transaction ID : INCA16334

Amount of Each Receipt this Period

12.50

☐ Memo Item

ERMK: CHRISSY HOULAHAN FOR CONGRESS

SUBTOTAL of Receipts This Page (optional)..... ►

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

37.50

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

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

FOR LINE NUMBER: PAGE 12 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANDLER, FROMA, , ,

Mailing Address 12500 PARK POTOMAC AVE 307N

City
POTOMAC

State
MD

Zip Code
20854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
BOWS ETC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 08 / 2017

Transaction ID : INCA16330

Amount of Each Receipt this Period

12.50

☐ Memo Item

ERMK: ROSEN FOR NEVADA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANDLER, FROMA, , ,

Mailing Address 12500 PARK POTOMAC AVE 307N

City
POTOMAC

State
MD

Zip Code
20854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
BOWS ETC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 08 / 2017

Transaction ID : INCA16336

Amount of Each Receipt this Period

12.50

☐ Memo Item

ERMK: KATIE PORTER FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SANDLER, FROMA, , ,

Mailing Address 12500 PARK POTOMAC AVE 307N

City
POTOMAC

State
MD

Zip Code
20854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
BOWS ETC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 08 / 2017

Transaction ID : INCA16332

Amount of Each Receipt this Period

12.50

☐ Memo Item

ERMK: VICKI JENSEN FOR CONGRESS

SUBTOTAL of Receipts This Page (optional)..... ►

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

37.50

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANDLER, FROMA, , ,

Mailing Address 12500 PARK POTOMAC AVE 307N

City
POTOMAC

State
MD

Zip Code
20854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
BOWS ETC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 08 / 2017

Transaction ID : INCA16333

Amount of Each Receipt this Period

12.50

☐ Memo Item

ERMK: EASTMAN FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANDLER, FROMA, , ,

Mailing Address 12500 PARK POTOMAC AVE 307N

City
POTOMAC

State
MD

Zip Code
20854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
BOWS ETC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 08 / 2017

Transaction ID : INCA16331

Amount of Each Receipt this Period

12.50

☐ Memo Item

ERMK: FINKENAUER FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALLACE, MARA, , ,

Mailing Address 433 MELVILLE AVE

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4580.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 08 / 2017

Transaction ID : INCA16422

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

275.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEHRMAN, ANDREA, , ,

Mailing Address 4022 BROWNLEE ROAD

City
LOUISVILLEState
KYZip Code
40207FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY OF LOUISVILLEOccupation (for Individual)
PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 09 / 2017

Transaction ID : INCA16337

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BANCHE, LINDA, , ,

Mailing Address 22 CRESTWOOD DR

City
FRAMINGHAMState
MAZip Code
01701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

36.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2017

Transaction ID : INCA16299

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BANCHE, LINDA, , ,

Mailing Address 22 CRESTWOOD DR

City
FRAMINGHAMState
MAZip Code
01701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

36.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2017

Transaction ID : INCA16302

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

SUBTOTAL of Receipts This Page (optional)..... ►

110.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BANCHE, LINDA, , ,

Mailing Address 22 CRESTWOOD DR

City
FRAMINGHAM

State
MA

Zip Code
01701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

36.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 12 / 2017

Transaction ID : INCA16300

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BANCHE, LINDA, , ,

Mailing Address 22 CRESTWOOD DR

City
FRAMINGHAM

State
MA

Zip Code
01701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

36.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 12 / 2017

Transaction ID : INCA16301

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BANCHE, LINDA, , ,

Mailing Address 22 CRESTWOOD DR

City
FRAMINGHAM

State
MA

Zip Code
01701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

36.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 12 / 2017

Transaction ID : INCA16304

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 16 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BANCHE, LINDA, , ,

Mailing Address 22 CRESTWOOD DR

City
FRAMINGHAM

State
MA

Zip Code
01701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

36.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 12 / 2017

Transaction ID : INCA16303

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSON, DONNA, , ,

Mailing Address 4 FARRINGTON CIRCLE

City
LINCOLNSHIRE

State
IL

Zip Code
60069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16354

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, DONNA, , ,

Mailing Address 4 FARRINGTON CIRCLE

City
LINCOLNSHIRE

State
IL

Zip Code
60069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16353

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

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

45.00

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

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

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

FOR LINE NUMBER: PAGE 17 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, DONNA, , ,

Mailing Address 4 FARRINGTON CIRCLE

City
LINCOLNSHIRE

State
IL

Zip Code
60069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16356

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSON, DONNA, , ,

Mailing Address 4 FARRINGTON CIRCLE

City
LINCOLNSHIRE

State
IL

Zip Code
60069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16358

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, DONNA, , ,

Mailing Address 4 FARRINGTON CIRCLE

City
LINCOLNSHIRE

State
IL

Zip Code
60069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16355

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

SUBTOTAL of Receipts This Page (optional)..... ►

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

60.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, DONNA, , ,

Mailing Address 4 FARRINGTON CIRCLE

City
LINCOLNSHIRE

State
IL

Zip Code
60069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16357

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSON, DONNA, , ,

Mailing Address 4 FARRINGTON CIRCLE

City
LINCOLNSHIRE

State
IL

Zip Code
60069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16359

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARLOW, SIBYLLE, , ,

Mailing Address 241 HOLDENWOOD RD

City
CONCORD

State
MA

Zip Code
01742

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16308

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

SUBTOTAL of Receipts This Page (optional)..... ►

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

125.00

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

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

FOR LINE NUMBER: PAGE 19 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARLOW, SIBYLLE, , ,

Mailing Address 241 HOLDENWOOD RD

City
CONCORD

State
MA

Zip Code
01742

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16307

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARLOW, SIBYLLE, , ,

Mailing Address 241 HOLDENWOOD RD

City
CONCORD

State
MA

Zip Code
01742

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16305

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARLOW, SIBYLLE, , ,

Mailing Address 241 HOLDENWOOD RD

City
CONCORD

State
MA

Zip Code
01742

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16309

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 20 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARLOW, SIBYLLE, , ,

Mailing Address 241 HOLDENWOOD RD

City
CONCORD

State
MA

Zip Code
01742

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16310

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARLOW, SIBYLLE, , ,

Mailing Address 241 HOLDENWOOD RD

City
CONCORD

State
MA

Zip Code
01742

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16306

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DIAZ NASH, LISA, , ,

Mailing Address 450 PARROTT DRIVE

City
SAN MATEO

State
CA

Zip Code
94402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ATMA CONNECT

Occupation (for Individual)
BOARD CHAIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4100.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16435

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

SUBTOTAL of Receipts This Page (optional)..... ►

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

1010.00

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

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

FOR LINE NUMBER: PAGE 21 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAZAGA, ROBERT, , ,

Mailing Address 500 PATERSON PLANK ROAD

City
UNION CITY

State
NJ

Zip Code
07087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIGHTS INTERNATIONAL GROUP, INC

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

195.18

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16315

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAZAGA, ROBERT, , ,

Mailing Address 500 PATERSON PLANK ROAD

City
UNION CITY

State
NJ

Zip Code
07087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIGHTS INTERNATIONAL GROUP, INC

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

195.18

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16313

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAZAGA, ROBERT, , ,

Mailing Address 500 PATERSON PLANK ROAD

City
UNION CITY

State
NJ

Zip Code
07087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIGHTS INTERNATIONAL GROUP, INC

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

195.18

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16312

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAZAGA, ROBERT, , ,

Mailing Address 500 PATERSON PLANK ROAD

City
UNION CITY

State
NJ

Zip Code
07087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIGHTS INTERNATIONAL GROUP, INC

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

195.18

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16314

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAZAGA, ROBERT, , ,

Mailing Address 500 PATERSON PLANK ROAD

City
UNION CITY

State
NJ

Zip Code
07087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIGHTS INTERNATIONAL GROUP, INC

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

195.18

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16311

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAZAGA, ROBERT, , ,

Mailing Address 500 PATERSON PLANK ROAD

City
UNION CITY

State
NJ

Zip Code
07087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIGHTS INTERNATIONAL GROUP, INC

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

195.18

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16316

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEITNER, JEFF, , ,

Mailing Address 5984 S PARIS PLACE

City
GREENWOOD VILLAGE

State
CO

Zip Code
80111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VECTRUS SYSTEMS CORPORATION

Occupation (for Individual)
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16368

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEITNER, JEFF, , ,

Mailing Address 5984 S PARIS PLACE

City
GREENWOOD VILLAGE

State
CO

Zip Code
80111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VECTRUS SYSTEMS CORPORATION

Occupation (for Individual)
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16369

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEITNER, JEFF, , ,

Mailing Address 5984 S PARIS PLACE

City
GREENWOOD VILLAGE

State
CO

Zip Code
80111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VECTRUS SYSTEMS CORPORATION

Occupation (for Individual)
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16371

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

SUBTOTAL of Receipts This Page (optional)..... ►

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

40.00

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

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

FOR LINE NUMBER: PAGE 24 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEITNER, JEFF, , ,

Mailing Address 5984 S PARIS PLACE

City
GREENWOOD VILLAGE

State
CO

Zip Code
80111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VECTRUS SYSTEMS CORPORATION

Occupation (for Individual)
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16372

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEITNER, JEFF, , ,

Mailing Address 5984 S PARIS PLACE

City
GREENWOOD VILLAGE

State
CO

Zip Code
80111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VECTRUS SYSTEMS CORPORATION

Occupation (for Individual)
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16370

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEITNER, JEFF, , ,

Mailing Address 5984 S PARIS PLACE

City
GREENWOOD VILLAGE

State
CO

Zip Code
80111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VECTRUS SYSTEMS CORPORATION

Occupation (for Individual)
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16373

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

35.00

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MCGLADE, MARGARET, , ,

Mailing Address **4 ELDOR AVE**

City
NEW CITY

State
NY

Zip Code
10954

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABOVE & BEYOND TRAVEL, INC.

Occupation (for Individual)
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

12 / 14 / 2017

Transaction ID : INCA16319

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MCGLADE, MARGARET, , ,

Mailing Address **4 ELDOR AVE**

City
NEW CITY

State
NY

Zip Code
10954

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABOVE & BEYOND TRAVEL, INC.

Occupation (for Individual)
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

12 / 14 / 2017

Transaction ID : INCA16320

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MCGLADE, MARGARET, , ,

Mailing Address **4 ELDOR AVE**

City
NEW CITY

State
NY

Zip Code
10954

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABOVE & BEYOND TRAVEL, INC.

Occupation (for Individual)
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

12 / 14 / 2017

Transaction ID : INCA16323

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

30.00

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

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

FOR LINE NUMBER: PAGE 26 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCGLADE, MARGARET, , ,

Mailing Address 4 ELDOR AVE

City
NEW CITY

State
NY

Zip Code
10954

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABOVE & BEYOND TRAVEL, INC.

Occupation (for Individual)
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16318

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCGLADE, MARGARET, , ,

Mailing Address 4 ELDOR AVE

City
NEW CITY

State
NY

Zip Code
10954

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABOVE & BEYOND TRAVEL, INC.

Occupation (for Individual)
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16322

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCGLADE, MARGARET, , ,

Mailing Address 4 ELDOR AVE

City
NEW CITY

State
NY

Zip Code
10954

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABOVE & BEYOND TRAVEL, INC.

Occupation (for Individual)
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16321

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

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

30.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STANISICH, THERESA, , ,

Mailing Address 3 JEFFERSON DR

City
CLANCYState
MTZip Code
59634FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MHSA

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16349

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STANISICH, THERESA, , ,

Mailing Address 3 JEFFERSON DR

City
CLANCYState
MTZip Code
59634FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MHSA

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16348

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STANISICH, THERESA, , ,

Mailing Address 3 JEFFERSON DR

City
CLANCYState
MTZip Code
59634FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MHSA

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16347

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

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

15.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STANISICH, THERESA, , ,

Mailing Address 3 JEFFERSON DR

City
CLANCY

State
MT

Zip Code
59634

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MHSA

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16350

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STANISICH, THERESA, , ,

Mailing Address 3 JEFFERSON DR

City
CLANCY

State
MT

Zip Code
59634

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MHSA

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16351

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STANISICH, THERESA, , ,

Mailing Address 3 JEFFERSON DR

City
CLANCY

State
MT

Zip Code
59634

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MHSA

Occupation (for Individual)

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16352

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 29 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALLACE, MARA, , ,

Mailing Address 433 MELVILLE AVE

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4580.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2017

Transaction ID : INCA16420

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CORNISH, LAURA, , ,

Mailing Address 143 WYNDHAM DRIVE

City
PORTOLA VALLEY

State
CA

Zip Code
94028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : INCA16387

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DIBRIENZA, JENNIFER, , ,

Mailing Address 186 PARK AVE

City
PALO ALTO

State
CA

Zip Code
94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

7350.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : INCA16432

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

SUBTOTAL of Receipts This Page (optional)..... ►

3000.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MASON, PAUL, , ,

Mailing Address 5610 WISCONSIN AVE, APT 606

City
CHEVY CHASE

State
MD

Zip Code
20815-4432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : INCA16650

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLDER AGUILAR, DINA, , ,

Mailing Address 322 CLIFTON ST

City
OAKLAND

State
CA

Zip Code
94618

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CORNERSTONE RESEARCH

Occupation (for Individual)
LITIGATION CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : INCA16436

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PESKIN, NEIL, , ,

Mailing Address , , , , , , , P, , O BOX 767

City
GLADWYNE

State
PA

Zip Code
19035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : INCA16327

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

SUBTOTAL of Receipts This Page (optional)..... ►

1205.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PESKIN, NEIL, , ,

Mailing Address , , , , , , , P , , O BOX 767

City
GLADWYNE

State
PA

Zip Code
19035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : INCA16328

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLE KOHLBERG, SUZANNE, , ,

Mailing Address 63 LOS TRANCOS

City
PORTOLA VALLEY

State
CA

Zip Code
94028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 16 / 2017

Transaction ID : INCA16386

Amount of Each Receipt this Period

5000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HELMLINGER, ROBYN, , ,

Mailing Address 307 SCOTT ST.

City
SAN FRANCISCO

State
CA

Zip Code
94117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SQUIRE PATTON BOGGS (US) LLP

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 17 / 2017

Transaction ID : INCA16412

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

SUBTOTAL of Receipts This Page (optional)..... ►

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

6005.00

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

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

FOR LINE NUMBER: PAGE 32 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPEISER, JESSICA, , ,

Mailing Address 1225 MAGDALENA CT

City
LOS ALTOS

State
CA

Zip Code
94024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VOTERCIRCLE

Occupation (for Individual)
CHIEF OUTREACH OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3005.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 17 / 2017

Transaction ID : INCA16381

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLE KOHLBERG, SUZANNE, , ,

Mailing Address 63 LOS TRANCOS

City
PORTOLA VALLEY

State
CA

Zip Code
94028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 18 / 2017

Transaction ID : INCA16385

Amount of Each Receipt this Period

2400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GROVE, KAREN, , ,

Mailing Address 3826 ALAMEDA DE LAS PULGAS

City
MENLO PARK

State
CA

Zip Code
94025

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 19 / 2017

Transaction ID : INCA16382

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

4400.00

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

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KNOPPER, ABBIE, , ,

Mailing Address 1143 GREENWOOD AVE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

DESIGNER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4050.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 19 / 2017

Transaction ID : INCA16419

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EGBERT, TENAYA, , ,

Mailing Address 1509 ALBEMARLE ST APT 307

City

SAINT PAUL

State

MN

Zip Code

55117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CSL PLASMA

Occupation (for Individual)

MEDICAL TECH RECEPTIONIST

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 20 / 2017

Transaction ID : INCA16345

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAFETRA, SUZANNE, , ,

Mailing Address 1600 EUCLID AVENUE

City

BERKELEY

State

CA

Zip Code

94709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

WRITER/FILMMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 20 / 2017

Transaction ID : INCA16441

Amount of Each Receipt this Period

330.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

SUBTOTAL of Receipts This Page (optional)..... ►

1340.00

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAFETRA, SUZANNE, , ,

Mailing Address 1600 EUCLID AVENUE

City
BERKELEY

State
CA

Zip Code
94709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
WRITER/FILMMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2017

Transaction ID : INCA16437

Amount of Each Receipt this Period

330.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAFETRA, SUZANNE, , ,

Mailing Address 1600 EUCLID AVENUE

City
BERKELEY

State
CA

Zip Code
94709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
WRITER/FILMMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2017

Transaction ID : INCA16438

Amount of Each Receipt this Period

330.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAFETRA, SUZANNE, , ,

Mailing Address 1600 EUCLID AVENUE

City
BERKELEY

State
CA

Zip Code
94709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
WRITER/FILMMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2017

Transaction ID : INCA16439

Amount of Each Receipt this Period

330.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

SUBTOTAL of Receipts This Page (optional)..... ►

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

990.00

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

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

FOR LINE NUMBER: PAGE 35 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAFETRA, SUZANNE, , ,

Mailing Address 1600 EUCLID AVENUE

City
BERKELEY

State
CA

Zip Code
94709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
WRITER/FILMMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2017

Transaction ID : INCA16442

Amount of Each Receipt this Period

330.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAFETRA, SUZANNE, , ,

Mailing Address 1600 EUCLID AVENUE

City
BERKELEY

State
CA

Zip Code
94709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
WRITER/FILMMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2017

Transaction ID : INCA16443

Amount of Each Receipt this Period

330.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAFETRA, SUZANNE, , ,

Mailing Address 1600 EUCLID AVENUE

City
BERKELEY

State
CA

Zip Code
94709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
WRITER/FILMMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2017

Transaction ID : INCA16440

Amount of Each Receipt this Period

330.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

990.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAY, DONNA, , ,

Mailing Address 6530 WINDING FARM

City
SAN ANTONIO

State
TX

Zip Code
78248

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

85.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 20 / 2017

Transaction ID : INCA16361

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAY, DONNA, , ,

Mailing Address 6530 WINDING FARM

City
SAN ANTONIO

State
TX

Zip Code
78248

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

85.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 20 / 2017

Transaction ID : INCA16362

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAY, DONNA, , ,

Mailing Address 6530 WINDING FARM

City
SAN ANTONIO

State
TX

Zip Code
78248

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

85.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 20 / 2017

Transaction ID : INCA16366

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

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

15.00

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

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

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAY, DONNA, , ,

Mailing Address 6530 WINDING FARM

City
SAN ANTONIO

State
TX

Zip Code
78248

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

85.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2017

Transaction ID : INCA16363

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAY, DONNA, , ,

Mailing Address 6530 WINDING FARM

City
SAN ANTONIO

State
TX

Zip Code
78248

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

85.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2017

Transaction ID : INCA16365

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAY, DONNA, , ,

Mailing Address 6530 WINDING FARM

City
SAN ANTONIO

State
TX

Zip Code
78248

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

85.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2017

Transaction ID : INCA16364

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

SUBTOTAL of Receipts This Page (optional)..... ►

15.00

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCGAUGH, RANDALL, , ,

Mailing Address 202 E 8TH ST

City
PERU

State
IN

Zip Code
46970

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIEHL TRANSPORT

Occupation (for Individual)
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 21 / 2017

Transaction ID : INCA16341

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCGAUGH, RANDALL, , ,

Mailing Address 202 E 8TH ST

City
PERU

State
IN

Zip Code
46970

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIEHL TRANSPORT

Occupation (for Individual)
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 21 / 2017

Transaction ID : INCA16343

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCGAUGH, RANDALL, , ,

Mailing Address 202 E 8TH ST

City
PERU

State
IN

Zip Code
46970

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIEHL TRANSPORT

Occupation (for Individual)
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 21 / 2017

Transaction ID : INCA16342

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

SUBTOTAL of Receipts This Page (optional)..... ►

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

30.00

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCGAUGH, RANDALL, , ,

Mailing Address 202 E 8TH ST

City
PERU

State
IN

Zip Code
46970

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RIEHL TRANSPORT

Occupation (for Individual)

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 21 / 2017

Transaction ID : INCA16340

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCGAUGH, RANDALL, , ,

Mailing Address 202 E 8TH ST

City
PERU

State
IN

Zip Code
46970

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RIEHL TRANSPORT

Occupation (for Individual)

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 21 / 2017

Transaction ID : INCA16338

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCGAUGH, RANDALL, , ,

Mailing Address 202 E 8TH ST

City
PERU

State
IN

Zip Code
46970

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RIEHL TRANSPORT

Occupation (for Individual)

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 21 / 2017

Transaction ID : INCA16339

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

30.00

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

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

FOR LINE NUMBER: PAGE 40 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLTON, ELIZABETH, , ,

Mailing Address 1848 PINE STREET

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 22 / 2017

Transaction ID : INCA16447

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLTON, ELIZABETH, , ,

Mailing Address 1848 PINE STREET

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 22 / 2017

Transaction ID : INCA16449

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLTON, ELIZABETH, , ,

Mailing Address 1848 PINE STREET

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 22 / 2017

Transaction ID : INCA16450

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

SUBTOTAL of Receipts This Page (optional)..... ►

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

300.00

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

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

FOR LINE NUMBER: PAGE 41 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLTON, ELIZABETH, , ,

Mailing Address 1848 PINE STREET

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 22 / 2017

Transaction ID : INCA16451

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLTON, ELIZABETH, , ,

Mailing Address 1848 PINE STREET

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 22 / 2017

Transaction ID : INCA16448

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLTON, ELIZABETH, , ,

Mailing Address 1848 PINE STREET

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 22 / 2017

Transaction ID : INCA16452

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 42 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DRAZAN, ERIKA, , ,

Mailing Address 800 CONCAR DRIVE, SUITE 100

City
SAN MATEO

State
CA

Zip Code
94402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PALO ALTO MEDICAL FOUNDATION

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1005.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 23 / 2017

Transaction ID : INCA16434

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STANLEY, SUKIE, , ,

Mailing Address 253 OXFORD AVE

City
PALO ALTO

State
CA

Zip Code
94306-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 23 / 2017

Transaction ID : INCA16458

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATHLEEN MURPHY FOR DELEGATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STANLEY, SUKIE, , ,

Mailing Address 253 OXFORD AVE

City
PALO ALTO

State
CA

Zip Code
94306-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 23 / 2017

Transaction ID : INCA16459

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATHY TRAN FOR DELEGATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 43 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STANLEY, SUKIE, , ,

Mailing Address 253 OXFORD AVE

City

PALO ALTO

State

CA

Zip Code

94306-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 23 / 2017

Transaction ID : INCA16462

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MICHELLE FOR DELEGATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STANLEY, SUKIE, , ,

Mailing Address 253 OXFORD AVE

City

PALO ALTO

State

CA

Zip Code

94306-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 23 / 2017

Transaction ID : INCA16460

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: CROWLEYFORVA98TH

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STANLEY, SUKIE, , ,

Mailing Address 253 OXFORD AVE

City

PALO ALTO

State

CA

Zip Code

94306-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 23 / 2017

Transaction ID : INCA16461

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MORGAN GOODMAN FOR VIRGINIA

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

15.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 44 OF 109

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

| | | | | |
|---|-------------|--|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. STANLEY, SUKIE, , , | | | Date of Receipt <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y Y 12 / 23 / 2017</div> </div> | |
| Mailing Address 253 OXFORD AVE | | | Transaction ID : INCA16457 | |
| City PALO ALTO | State CA | Zip Code 94306-1133 | Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">5.00</div> | |
| FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div> | | | <input type="checkbox"/> Memo Item ERMK: KARRIE DELANEY FOR DELEGATE | |
| Name of Employer (for Individual) NONE | | Occupation (for Individual) RETIRED | Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">410.00</div> | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| | | | | |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. STANLEY, SUKIE, , , | | | Date of Receipt <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y Y 12 / 23 / 2017</div> </div> | |
| Mailing Address 253 OXFORD AVE | | | Transaction ID : INCA16456 | |
| City PALO ALTO | State CA | Zip Code 94306-1133 | Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">5.00</div> | |
| FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div> | | | <input type="checkbox"/> Memo Item ERMK: JENNIFER CARROLL FOY FOR DELEGATE | |
| Name of Employer (for Individual) NONE | | Occupation (for Individual) RETIRED | Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">410.00</div> | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| | | | | |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. STANLEY, SUKIE, , , | | | Date of Receipt <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y Y 12 / 23 / 2017</div> </div> | |
| Mailing Address 253 OXFORD AVE | | | Transaction ID : INCA16453 | |
| City PALO ALTO | State CA | Zip Code 94306-1133 | Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">5.00</div> | |
| FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div> | | | <input type="checkbox"/> Memo Item ERMK: CHERYL TURPIN FOR VIRGINIA BEACH | |
| Name of Employer (for Individual) NONE | | Occupation (for Individual) RETIRED | Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">410.00</div> | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| | | | | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | <div style="border: 1px solid black; padding: 2px; text-align: right;">15.00</div> | |
| TOTAL This Period (last page this line number only)..... ▶ | | | <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> | |

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

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

FOR LINE NUMBER: PAGE 45 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STANLEY, SUKIE, , ,

Mailing Address 253 OXFORD AVE

City

PALO ALTO

State

CA

Zip Code

94306-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 23 / 2017

Transaction ID : INCA16455

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ELIZABETH GUZMAN FOR DELEGATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STANLEY, SUKIE, , ,

Mailing Address 253 OXFORD AVE

City

PALO ALTO

State

CA

Zip Code

94306-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 23 / 2017

Transaction ID : INCA16454

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: FRIENDS OF DANICA ROEM

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HERRICK, TRICIA, , ,

Mailing Address 1510 PORTOLA AVENUE

City

PALO ALTO

State

CA

Zip Code

94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

NOT EMPLOYED

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 24 / 2017

Transaction ID : INCA16431

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

SUBTOTAL of Receipts This Page (optional)..... ►

1010.00

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

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

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

FOR LINE NUMBER: PAGE 46 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLEMENT, KIMBERLY, , ,

Mailing Address 7547 WALNUT ORCHARD WAY

City
SANTA ROSA

State
CA

Zip Code
95409

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2017

Transaction ID : INCA16445

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16407

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: FRIENDS OF MAZIE HIRONO

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16404

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

1010.00

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

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

FOR LINE NUMBER: PAGE 47 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16403

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KLOBUCHAR FOR MINNESOTA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16406

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16402

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: GILLIBRAND FOR SENATE

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

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

15.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 48 OF 109

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16401

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: FEINSTEIN FOR SENATE 2018

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16400

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16409

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 49 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16405

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: FRIENDS OF MARIA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16408

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEWART, SUSANNE, , ,

Mailing Address 421, POPPY PLACE

City
MTN. VIEW

State
CA

Zip Code
94043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16393

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: GILLIBRAND FOR SENATE

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 50 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEWART, SUSANNE, , ,

Mailing Address 421, POPPY PLACE

City
MTN. VIEW

State
CA

Zip Code
94043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16389

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KLOBUCHAR FOR MINNESOTA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEWART, SUSANNE, , ,

Mailing Address 421, POPPY PLACE

City
MTN. VIEW

State
CA

Zip Code
94043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16394

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEWART, SUSANNE, , ,

Mailing Address 421, POPPY PLACE

City
MTN. VIEW

State
CA

Zip Code
94043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16392

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 51 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEWART, SUSANNE, , ,

Mailing Address 421, POPPY PLACE

City
MTN. VIEW

State
CA

Zip Code
94043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16390

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KAMALA HARRIS FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEWART, SUSANNE, , ,

Mailing Address 421, POPPY PLACE

City
MTN. VIEW

State
CA

Zip Code
94043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16391

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, SHEILA, , ,

Mailing Address 553A CLIPPER ST

City
SAN FRANCISCO

State
CA

Zip Code
94114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LTSE

Occupation (for Individual)
MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2017

Transaction ID : INCA16411

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

SUBTOTAL of Receipts This Page (optional)..... ►

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

1010.00

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DICKSON, LAURIE, , ,

Mailing Address **441 BIRKET DR**

City
DURANGO

State
CO

Zip Code
81301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
4CORE

Occupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

12 / 30 / 2017

Transaction ID : INCA16379

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DICKSON, LAURIE, , ,

Mailing Address **441 BIRKET DR**

City
DURANGO

State
CO

Zip Code
81301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
4CORE

Occupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

12 / 30 / 2017

Transaction ID : INCA16378

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: BONAMICI FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DICKSON, LAURIE, , ,

Mailing Address **441 BIRKET DR**

City
DURANGO

State
CO

Zip Code
81301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
4CORE

Occupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25.00

Date of Receipt

12 / 30 / 2017

Transaction ID : INCA16376

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: CHRISSY HOULAHAN FOR CONGRESS

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 53 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DICKSON, LAURIE, , ,

Mailing Address 441 BIRKET DR

City
DURANGOState
COZip Code
81301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
4COREOccupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 30 / 2017

Transaction ID : INCA16377

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE PORTER FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DICKSON, LAURIE, , ,

Mailing Address 441 BIRKET DR

City
DURANGOState
COZip Code
81301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
4COREOccupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 30 / 2017

Transaction ID : INCA16375

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: VICKI JENSEN FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOSONO, ERWIN, , ,

Mailing Address 1430 HARKER AVENUE

City
PALO ALTOState
CAZip Code
94301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 30 / 2017

Transaction ID : INCA16418

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

510.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POLETTI, ANN, , ,

Mailing Address 121 7TH AVENUE

City
SAN FRANCISCO

State
CA

Zip Code
94118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOCUSIGN

Occupation (for Individual)
SENIOR DIRECTOR, MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 30 / 2017

Transaction ID : INCA16413

Amount of Each Receipt this Period

500.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POLETTI, ANN, , ,

Mailing Address 121 7TH AVENUE

City
SAN FRANCISCO

State
CA

Zip Code
94118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOCUSIGN

Occupation (for Individual)
SENIOR DIRECTOR, MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 30 / 2017

Transaction ID : INCA16414

Amount of Each Receipt this Period

500.00

☐ Memo Item

ERMK: SINEMA FOR ARIZONA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POLETTI, ANN, , ,

Mailing Address 121 7TH AVENUE

City
SAN FRANCISCO

State
CA

Zip Code
94118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOCUSIGN

Occupation (for Individual)
SENIOR DIRECTOR, MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 30 / 2017

Transaction ID : INCA16416

Amount of Each Receipt this Period

500.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

1500.00

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

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

FOR LINE NUMBER: PAGE 55 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POLETTI, ANN, , ,

Mailing Address 121 7TH AVENUE

City
SAN FRANCISCO

State
CA

Zip Code
94118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOCUSIGN

Occupation (for Individual)
SENIOR DIRECTOR, MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 30 / 2017

Transaction ID : INCA16415

Amount of Each Receipt this Period

500.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALSH, DIANA CHAPMAN, , ,

Mailing Address 9 MILLER COURT

City
REDWOOD CITY

State
CA

Zip Code
94061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 30 / 2017

Transaction ID : INCA16396

Amount of Each Receipt this Period

800.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALSH, DIANA CHAPMAN, , ,

Mailing Address 9 MILLER COURT

City
REDWOOD CITY

State
CA

Zip Code
94061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 30 / 2017

Transaction ID : INCA16395

Amount of Each Receipt this Period

800.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

2100.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALSH, DIANA CHAPMAN, , ,

Mailing Address 9 MILLER COURT

City

REDWOOD CITY

State

CA

Zip Code

94061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 30 / 2017

Transaction ID : INCA16398

Amount of Each Receipt this Period

800.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALSH, DIANA CHAPMAN, , ,

Mailing Address 9 MILLER COURT

City

REDWOOD CITY

State

CA

Zip Code

94061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 30 / 2017

Transaction ID : INCA16399

Amount of Each Receipt this Period

800.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALSH, DIANA CHAPMAN, , ,

Mailing Address 9 MILLER COURT

City

REDWOOD CITY

State

CA

Zip Code

94061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 30 / 2017

Transaction ID : INCA16397

Amount of Each Receipt this Period

800.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

SUBTOTAL of Receipts This Page (optional)..... ►

2400.00

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

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

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOORE, COURTNEY, , ,

Mailing Address 1444 VALLEJO STREET APT. 2

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RODAN + FIELDS

Occupation (for Individual)
VICE PRESIDENT, STRATEGY & INSI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2017

Transaction ID : INCA16410

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICHARDSON, SUSIE, , ,

Mailing Address 1322 MARTIN AVE

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2017

Transaction ID : INCA16417

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

350.00

42655.00

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

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

FOR LINE NUMBER: PAGE 58 OF 109

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCK

State
ND

Zip Code
58502

FEC ID number of contributing
federal political committee.

C C00505552

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1397.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 06 / 2017

Transaction ID : INCA16648

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHRISSY HOULAHAN FOR CONGRESS

Mailing Address PO BOX 222

City
DEVON

State
PA

Zip Code
19333

FEC ID number of contributing
federal political committee.

C C00637371

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 13 / 2017

Transaction ID : INCA16635

Amount of Each Receipt this Period

0.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EASTMAN FOR CONGRESS

Mailing Address 4808 DAVENPORT STREET

City
OMAHA

State
NE

Zip Code
68132

FEC ID number of contributing
federal political committee.

C C00639310

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

0.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 13 / 2017

Transaction ID : INCA16636

Amount of Each Receipt this Period

0.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

41.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 OF 109

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129FEC ID number of contributing
federal political committee.

C

C00500843

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4363.40

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 13 | | 2017 |

Transaction ID : INCA16630

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FINKENAUER FOR CONGRESS

Mailing Address P.O. BOX 598

City
DUBUQUEState
IAZip Code
52004FEC ID number of contributing
federal political committee.

C

C00637074

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12.10

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 13 | | 2017 |

Transaction ID : INCA16637

Amount of Each Receipt this Period

0.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCKState
NDZip Code
58502FEC ID number of contributing
federal political committee.

C

C00505552

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1397.60

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 13 | | 2017 |

Transaction ID : INCA16631

Amount of Each Receipt this Period

40.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

80.70

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KATIE PORTER FOR CONGRESS

Mailing Address 777 S FIGUEROA ST STE 4050

City
LOS ANGELES

State
CA

Zip Code
90017

FEC ID number of contributing
federal political committee.

C C00636571

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 13 / 2017

Transaction ID : INCA16638

Amount of Each Receipt this Period

0.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. LISA MANDELBLATT FOR CONGRESS

Mailing Address PO BOX 2334

City
WESTFIELD

State
NJ

Zip Code
07091

FEC ID number of contributing
federal political committee.

C C00639252

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 13 / 2017

Transaction ID : INCA16639

Amount of Each Receipt this Period

0.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUIS

State
MO

Zip Code
63130

FEC ID number of contributing
federal political committee.

C C00577148

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1877.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 13 / 2017

Transaction ID : INCA16633

Amount of Each Receipt this Period

0.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1.20

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 109

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074FEC ID number of contributing
federal political committee.**C**

C00606939

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.14

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12 | | 13 | | 2017 |

Transaction ID : INCA16634

Amount of Each Receipt this Period

0.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003FEC ID number of contributing
federal political committee.**C**

C00508804

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.30

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12 | | 13 | | 2017 |

Transaction ID : INCA16632

Amount of Each Receipt this Period

0.70

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826FEC ID number of contributing
federal political committee.**C**

C00344473

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1511.20

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12 | | 13 | | 2017 |

Transaction ID : INCA16629

Amount of Each Receipt this Period

0.20

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

1.60

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

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

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

FOR LINE NUMBER: PAGE 62 OF 109

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISONState
WIZip Code
53701FEC ID number of contributing
federal political committee.

C

C00326801

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2086.52

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 13 | | 2017 |

Transaction ID : INCA16628

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VICKI JENSEN FOR CONGRESS

Mailing Address P.O. BOX 346

City
OWATONNAState
MNZip Code
55060FEC ID number of contributing
federal political committee.

C

C00647040

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7.30

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 13 | | 2017 |

Transaction ID : INCA16640

Amount of Each Receipt this Period

0.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELECTING WOMEN BAY AREA PAC

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118FEC ID number of contributing
federal political committee.

C

C00585687

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2320.20

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 20 | | 2017 |

Transaction ID : INCA16646

Amount of Each Receipt this Period

520.00

☐ Memo Item

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

520.70

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCK

State
ND

Zip Code
58502

FEC ID number of contributing
federal political committee.

C C00505552

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1397.60

Date of Receipt

12 / **20** / **2017**

Transaction ID : INCA16643

Amount of Each Receipt this Period

2.40

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUIS

State
MO

Zip Code
63130

FEC ID number of contributing
federal political committee.

C C00577148

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1877.20

Date of Receipt

12 / **20** / **2017**

Transaction ID : INCA16645

Amount of Each Receipt this Period

2.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSON

State
NV

Zip Code
89074

FEC ID number of contributing
federal political committee.

C C00606939

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

80.14

Date of Receipt

12 / **20** / **2017**

Transaction ID : INCA16647

Amount of Each Receipt this Period

2.60

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

7.20

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

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

FOR LINE NUMBER:
(check only one)

PAGE 64 OF 109

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
 WASHINGTON

State
 DC

Zip Code
 20003

FEC ID number of contributing
federal political committee.

C C00508804

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.30

Date of Receipt

12 / **20** / **2017**

Transaction ID : INCA16644

Amount of Each Receipt this Period

2.60

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
 EAST LANSING

State
 MI

Zip Code
 48826

FEC ID number of contributing
federal political committee.

C C00344473

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1511.20

Date of Receipt

12 / **20** / **2017**

Transaction ID : INCA16642

Amount of Each Receipt this Period

15.40

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
 MADISON

State
 WI

Zip Code
 53701

FEC ID number of contributing
federal political committee.

C C00326801

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2086.52

Date of Receipt

12 / **20** / **2017**

Transaction ID : INCA16641

Amount of Each Receipt this Period

2.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

20.20

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

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

FOR LINE NUMBER: PAGE 65 OF 109

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELECTING WOMEN BAY AREA PAC

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCO

State
CA

Zip Code
94118

FEC ID number of contributing
federal political committee.

C

C00585687

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2320.20

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 27 | | 2017 |

Transaction ID : INCA16616

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCK

State
ND

Zip Code
58502

FEC ID number of contributing
federal political committee.

C

C00505552

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1397.60

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 27 | | 2017 |

Transaction ID : INCA16613

Amount of Each Receipt this Period

17.80

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUIS

State
MO

Zip Code
63130

FEC ID number of contributing
federal political committee.

C

C00577148

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1877.20

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 27 | | 2017 |

Transaction ID : INCA16615

Amount of Each Receipt this Period

17.80

☐ Memo Item

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

75.60

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

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

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

FOR LINE NUMBER: PAGE 66 OF 109

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074FEC ID number of contributing
federal political committee.

C

C00606939

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.14

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12 | | 27 | | 2017 |

Transaction ID : INCA16617

Amount of Each Receipt this Period

17.80

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003FEC ID number of contributing
federal political committee.

C

C00508804

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.30

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12 | | 27 | | 2017 |

Transaction ID : INCA16614

Amount of Each Receipt this Period

18.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826FEC ID number of contributing
federal political committee.

C

C00344473

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1511.20

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12 | | 27 | | 2017 |

Transaction ID : INCA16612

Amount of Each Receipt this Period

0.60

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

36.60

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 67 OF 109

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISON

State
WI

Zip Code
53701

FEC ID number of contributing
federal political committee.

C C00326801

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2086.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 27 / 2017

Transaction ID : INCA16611

Amount of Each Receipt this Period

17.80

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

17.80

802.60

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City
SAN FRANCISCOState
CAZip Code
94128Purpose of Disbursement
ACCOUNT FEE

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 04 | | 2017 |

FEC Identification Number

C

Transaction ID : EXPB16290

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST DATAMailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000City
ATLANTAState
GAZip Code
30342Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 04 | | 2017 |

FEC Identification Number

C

Transaction ID : EXPB16289

Amount of Each Disbursement this Period

44.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST DATAMailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000City
ATLANTAState
GAZip Code
30342Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 04 | | 2017 |

FEC Identification Number

C

Transaction ID : EXPB16292

Amount of Each Disbursement this Period

635.93

☐ Memo Item

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

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

705.41

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. FIRST DATAMailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000City
ATLANTAState
GAZip Code
30342Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 04 | | 2017 |

FEC Identification Number

C

Transaction ID : EXPB16291

Amount of Each Disbursement this Period

130.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK

Mailing Address 464 CALIFORNIA STREET

City
SAN FRANCISCOState
CAZip Code
94163Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 11 | | 2017 |

FEC Identification Number

C

Transaction ID : EXPB16651

Amount of Each Disbursement this Period

54.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ACTBLUE TECHNICAL SERVICES

Mailing Address PO BOX 441146

City
SOMMERVILLEState
MAZip Code
02144Purpose of Disbursement
CREDIT CARD PROCESSING FEES

003

Category/
Type

Candidate Name

ACTBLUE TECHNICAL SERVICESOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 17 | | 2017 |

FEC Identification Number

C

Transaction ID : EXPB16298

Amount of Each Disbursement this Period

0.04

☐ Memo Item

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

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

185.02

890.43

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 70 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCKState
NDZip Code
58502

Purpose of Disbursement

ERMK: SIMONE COXE-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

HEITKAMP, HEIDI, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: ND

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|----|---|---|---|----|---|---|---|------|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 12 | | | | 06 | | | | 2017 | | | | | |

FEC Identification Number

C C00505552**Transaction ID : EXPB16463**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHRISSY HOULAHAN FOR CONGRESS

Mailing Address PO BOX 222

City
DEVONState
PAZip Code
19333

Purpose of Disbursement

ERMK: FROMA SANDLER-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

HOULAHAN, CHRISSY, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: PA

District: 06

Date of Disbursement

| | | | | | | | | | | | | | |
|----|---|---|---|----|---|---|---|------|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 12 | | | | 13 | | | | 2017 | | | | | |

FEC Identification Number

C C00637371**Transaction ID : EXPB16466**

Amount of Each Disbursement this Period

12.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EASTMAN FOR CONGRESS

Mailing Address 4808 DAVENPORT STREET

City
OMAHAState
NEZip Code
68132

Purpose of Disbursement

ERMK: FROMA SANDLER-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

EASTMAN, KARA, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: NE

District: 02

Date of Disbursement

| | | | | | | | | | | | | | |
|----|---|---|---|----|---|---|---|------|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 12 | | | | 13 | | | | 2017 | | | | | |

FEC Identification Number

C C00639310**Transaction ID : EXPB16467**

Amount of Each Disbursement this Period

12.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1025.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: SHERYL KLEIN-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 1 | 2 | 3 | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C C00500843**Transaction ID : EXPB16464**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FINKENAUER FOR CONGRESS

Mailing Address P.O. BOX 598

City
DUBUQUEState
IAZip Code
52004

Purpose of Disbursement

ERMK: FROMA SANDLER-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

FINKENAUER, ABBY, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 1 | 2 | 3 | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C C00637074**Transaction ID : EXPB16468**

Amount of Each Disbursement this Period

12.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCKState
NDZip Code
58502

Purpose of Disbursement

ERMK: GARY LAUDER-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

HEITKAMP, HEIDI, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: ND

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 1 | 2 | 3 | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C C00505552**Transaction ID : EXPB16465**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2012.50

| | | | | | | | | | |
|--|-----|--|-----|----------|-----|--|----|--|-----|
| | 21b | | 22 | X | 23 | | 26 | | 27 |
| | 28a | | 28b | | 28c | | 29 | | 30b |

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. HEIDI FOR SENATE

State: ND District:

 Memo Item

B. KATIE PORTER FOR CONGRESS

State: CA District: 45

 Memo Item

C. LISA MANDELBLATT FOR CONGRESS

State: NJ District: 07

 Memo Item

30.00

[illegible]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUISState
MOZip Code
63130

Purpose of Disbursement

ERMK: LINDA BANCHE-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

MCCASKILL, CLAIRE, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MO

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 3 | | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C C00577148**Transaction ID : EXPB16475**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: FROMA SANDLER-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify)

State: NV

District: 03

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 3 | | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C C00606939**Transaction ID : EXPB16471**

Amount of Each Disbursement this Period

12.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: LINDA BANCHE-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: NV

District: 03

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 3 | | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C C00606939**Transaction ID : EXPB16476**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

22.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: FROMA SANDLER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 13 | | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16472**

Amount of Each Disbursement this Period

12.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: LINDA BANCHE-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 13 | | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16477**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826

Purpose of Disbursement

ERMK: LINDA BANCHE-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MI

District:

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 13 | | 2017 |

FEC Identification Number

C C00344473**Transaction ID : EXPB16478**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISONState
WIZip Code
53701

Purpose of Disbursement

ERMK: LINDA BANCHE-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

BALDWIN, TAMMY, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

| | | | | | | | | | | | | | |
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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 3 | | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C C00326801**Transaction ID : EXPB16479**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VICKI JENSEN FOR CONGRESS

Mailing Address P.O. BOX 346

City
OWATONNAState
MNZip Code
55060

Purpose of Disbursement

ERMK: FROMA SANDLER-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

JENSEN, VICKI, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MN

District: 01

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 3 | | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C C00647040**Transaction ID : EXPB16473**

Amount of Each Disbursement this Period

12.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELECTING WOMEN BAY AREA PAC

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Purpose of Disbursement

ERMK: MARA WALLACE-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

ELECTING WOMEN BAY AREA PAC

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 2 | 0 | | | 2 | 0 | 1 | 7 | | |

FEC Identification Number

C C00585687**Transaction ID : EXPB16480**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1017.50

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELECTING WOMEN BAY AREA PAC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 20 | | 2017 |

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Purpose of Disbursement

ERMK: LISA NASH-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ELECTING WOMEN BAY AREA PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

FEC Identification Number

C C00585687**Transaction ID : EXPB16481**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELECTING WOMEN BAY AREA PAC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 20 | | 2017 |

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Purpose of Disbursement

ERMK: LAURA CORNISH-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ELECTING WOMEN BAY AREA PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

FEC Identification Number

C C00585687**Transaction ID : EXPB16518**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELECTING WOMEN BAY AREA PAC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 20 | | 2017 |

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Purpose of Disbursement

ERMK: DINA OLDER AGUILAR-TRANSMITTED BY CHECK. PAC LIMIT
NOT AFFECTED

Candidate Name

ELECTING WOMEN BAY AREA PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

FEC Identification Number

C C00585687**Transaction ID : EXPB16519**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELECTING WOMEN BAY AREA PAC

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118Purpose of Disbursement
ERMK: JENNIFER DIBRIENZA-TRANSMITTED BY CHECK. PAC LIMIT
NOT AFFECTED

Candidate Name

ELECTING WOMEN BAY AREA PAC

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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| 1 | 2 | | | | | | | 2 | 0 | | | | 7 |

FEC Identification Number

C C00585687**Transaction ID : EXPB16520**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELECTING WOMEN BAY AREA PAC

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118Purpose of Disbursement
ERMK: SUZANNE COLE KOHLBERG-TRANSMITTED BY CHECK. PAC
LIMIT NOT AFFECTED

Candidate Name

ELECTING WOMEN BAY AREA PAC

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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| 1 | 2 | | | | | | | 2 | 0 | | | | 7 |

FEC Identification Number

C C00585687**Transaction ID : EXPB16523**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELECTING WOMEN BAY AREA PAC

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118Purpose of Disbursement
ERMK: ROBYN HELMLINGER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ELECTING WOMEN BAY AREA PAC

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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| 1 | 2 | | | | | | | 2 | 0 | | | | 7 |

FEC Identification Number

C C00585687**Transaction ID : EXPB16524**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELECTING WOMEN BAY AREA PAC

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Purpose of Disbursement

ERMK: JESSICA SPEISER-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED
Candidate Name**ELECTING WOMEN BAY AREA PAC**

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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| 12 | | | | 20 | | | | 2017 | | | | | |

FEC Identification Number

C C00585687**Transaction ID : EXPB16525**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELECTING WOMEN BAY AREA PAC

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Purpose of Disbursement

ERMK: ABBIE KNOPPER-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED
Candidate Name**ELECTING WOMEN BAY AREA PAC**

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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| 12 | | | | 20 | | | | 2017 | | | | | |

FEC Identification Number

C C00585687**Transaction ID : EXPB16526**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCKState
NDZip Code
58502

Purpose of Disbursement

ERMK: SIBYLLE BARLOW-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED
Candidate Name**HEITKAMP, HEIDI, , ,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: ND

District:

Category/
Type

Date of Disbursement

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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 12 | | | | 20 | | | | 2017 | | | | | |

FEC Identification Number

C C00505552**Transaction ID : EXPB16482**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2005.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCKState
NDZip Code
58502

Purpose of Disbursement

ERMK: MARGARET MCGLADE-TRANSMITTED BY CHECK. PAC LIMIT

NOT AFFECTED

Candidate Name

HEITKAMP, HEIDI, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: ND

District:

Category/
Type

Date of Disbursement

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| 1 | 2 | | | | | | | 2 | 0 | | | | |

FEC Identification Number

C C00505552**Transaction ID : EXPB16483**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCKState
NDZip Code
58502

Purpose of Disbursement

ERMK: DONNA ANDERSON-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

HEITKAMP, HEIDI, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: ND

District:

Category/
Type

Date of Disbursement

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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 0 | | | | |

FEC Identification Number

C C00505552**Transaction ID : EXPB16484**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCKState
NDZip Code
58502

Purpose of Disbursement

ERMK: ROBERT HAZAGA-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

HEITKAMP, HEIDI, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: ND

District:

Category/
Type

Date of Disbursement

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| 1 | 2 | | | | | | | 2 | 0 | | | | |

FEC Identification Number

C C00505552**Transaction ID : EXPB16485**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCKState
NDZip Code
58502

Purpose of Disbursement

ERMK: THERESA STANISICH-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

HEITKAMP, HEIDI, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: ND

District:

Category/
Type

Date of Disbursement

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| 1 | 2 | | | | | | | 2 | 0 | | | | |

FEC Identification Number

C C00505552**Transaction ID : EXPB16486**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCKState
NDZip Code
58502

Purpose of Disbursement

ERMK: JEFF LEITNER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

HEITKAMP, HEIDI, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify)

State: ND

District:

Category/
Type

Date of Disbursement

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| 1 | 2 | | | | | | | 2 | 0 | | | | |

FEC Identification Number

C C00505552**Transaction ID : EXPB16487**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUISState
MOZip Code
63130

Purpose of Disbursement

ERMK: SIBYLLE BARLOW-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

MCCASKILL, CLAIRE, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MO

District:

Category/
Type

Date of Disbursement

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| 1 | 2 | | | | | | | 2 | 0 | | | | |

FEC Identification Number

C C00577148**Transaction ID : EXPB16488**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUISState
MOZip Code
63130

Purpose of Disbursement

ERMK: MARGARET MCGLADE-TRANSMITTED BY CHECK. PAC LIMIT

NOT AFFECTED

Candidate Name

MCCASKILL, CLAIRE, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MO

District:

Category/
Type

Date of Disbursement

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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | 2 | 0 | | | | | 2 | 0 | 17 |

FEC Identification Number

C C00577148**Transaction ID : EXPB16489**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUISState
MOZip Code
63130

Purpose of Disbursement

ERMK: DONNA ANDERSON-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

MCCASKILL, CLAIRE, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify)

State: MO

District:

Category/
Type

Date of Disbursement

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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | 2 | 0 | | | | | 2 | 0 | 17 |

FEC Identification Number

C C00577148**Transaction ID : EXPB16490**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUISState
MOZip Code
63130

Purpose of Disbursement

ERMK: ROBERT HAZAGA-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

MCCASKILL, CLAIRE, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MO

District:

Category/
Type

Date of Disbursement

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| 1 | 2 | | | | 2 | 0 | | | | | 2 | 0 | 17 |

FEC Identification Number

C C00577148**Transaction ID : EXPB16491**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

35.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUISState
MOZip Code
63130

Purpose of Disbursement

ERMK: THERESA STANISICH-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

MCCASKILL, CLAIRE, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MO

District:

Date of Disbursement

| | | | | | | | | | | | | | |
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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 0 | | | | |

FEC Identification Number

C C00577148**Transaction ID : EXPB16492**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUISState
MOZip Code
63130

Purpose of Disbursement

ERMK: JEFF LEITNER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

MCCASKILL, CLAIRE, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MO

District:

Date of Disbursement

| | | | | | | | | | | | | | |
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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 0 | | | | |

FEC Identification Number

C C00577148**Transaction ID : EXPB16493**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: SIBYLLE BARLOW-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: NV

District: 03

Date of Disbursement

| | | | | | | | | | | | | | |
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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 0 | | | | |

FEC Identification Number

C C00606939**Transaction ID : EXPB16494**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: MARGARET MCGLADE-TRANSMITTED BY CHECK. PAC LIMIT

NOT AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House☐ Senate☐ President

State: NV

District: 03

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼Category/
Type

Date of Disbursement

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| 1 | 2 | | | | | | | 2 | 0 | | | | |

FEC Identification Number

C C00606939**Transaction ID : EXPB16495**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: DONNA ANDERSON-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House☐ Senate☐ President

State: NV

District: 03

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼Category/
Type

Date of Disbursement

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| 1 | 2 | | | | | | | 2 | 0 | | | | |

FEC Identification Number

C C00606939**Transaction ID : EXPB16496**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: ROBERT HAZAGA-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House☐ Senate☐ President

State: NV

District: 03

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼Category/
Type

Date of Disbursement

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| 1 | 2 | | | | | | | 2 | 0 | | | | |

FEC Identification Number

C C00606939**Transaction ID : EXPB16497**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 84 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: THERESA STANISICH-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NV

District: 03

Category/
Type

Date of Disbursement

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| 12 | / | 20 | / | 2017 |

FEC Identification Number

C C00606939**Transaction ID : EXPB16498**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: JEFF LEITNER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NV

District: 03

Category/
Type

Date of Disbursement

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| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2017 |

FEC Identification Number

C C00606939**Transaction ID : EXPB16499**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: NEIL PESKIN-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NV

District: 03

Category/
Type

Date of Disbursement

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| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2017 |

FEC Identification Number

C C00606939**Transaction ID : EXPB16521**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 85 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: SIBYLLE BARLOW-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

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| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16500**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: MARGARET MCGLADE-TRANSMITTED BY CHECK. PAC LIMIT
NOT AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

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| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16501**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: DONNA ANDERSON-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

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| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16502**

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

35.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 86 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: ROBERT HAZAGA-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

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| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16503**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: THERESA STANISICH-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

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| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16504**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: JEFF LEITNER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

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| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16505**

Amount of Each Disbursement this Period

15.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 87 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: NEIL PESKIN-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

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|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16522**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826

Purpose of Disbursement

ERMK: SIBYLLE BARLOW-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MI

District:

Category/
Type

Date of Disbursement

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|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2017 |

FEC Identification Number

C C00344473**Transaction ID : EXPB16506**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826

Purpose of Disbursement

ERMK: MARGARET MCGLADE-TRANSMITTED BY CHECK. PAC LIMIT
NOT AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MI

District:

Category/
Type

Date of Disbursement

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|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2017 |

FEC Identification Number

C C00344473**Transaction ID : EXPB16507**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826

Purpose of Disbursement

ERMK: DONNA ANDERSON-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MI

District:

Category/
Type

Date of Disbursement

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FEC Identification Number

C C00344473**Transaction ID : EXPB16508**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826

Purpose of Disbursement

ERMK: ROBERT HAZAGA-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MI

District:

Category/
Type

Date of Disbursement

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| 1 | 2 | | | | 2 | 0 | | | | | | 2 | 0 | 1 | 7 |

FEC Identification Number

C C00344473**Transaction ID : EXPB16509**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826

Purpose of Disbursement

ERMK: THERESA STANISICH-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MI

District:

Category/
Type

Date of Disbursement

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| 1 | 2 | | | | 2 | 0 | | | | | | 2 | 0 | 1 | 7 |

FEC Identification Number

C C00344473**Transaction ID : EXPB16510**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 89 OF 109

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826

Purpose of Disbursement

ERMK: JEFF LEITNER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MI

District:

Date of Disbursement

| | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y | |
| 1 | 2 | | | | 2 | 0 | | | | | 2 | 0 | 1 | 7 |

FEC Identification Number

C C00344473**Transaction ID : EXPB16511**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826

Purpose of Disbursement

ERMK: SUZANNE LAFETRA-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MI

District:

Date of Disbursement

| | | | | | | | | | | | | | | |
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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y | |
| 1 | 2 | | | | 2 | 0 | | | | | 2 | 0 | 1 | 7 |

FEC Identification Number

C C00344473**Transaction ID : EXPB16537**

Amount of Each Disbursement this Period

330.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISONState
WIZip Code
53701

Purpose of Disbursement

ERMK: SIBYLLE BARLOW-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

BALDWIN, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

| | | | | | | | | | | | | | | |
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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y | |
| 1 | 2 | | | | 2 | 0 | | | | | 2 | 0 | 1 | 7 |

FEC Identification Number

C C00326801**Transaction ID : EXPB16512**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

345.00

| | | | | | | | | | |
|--|-----|--|-----|----------|-----|--|----|--|-----|
| | 21b | | 22 | X | 23 | | 26 | | 27 |
| | 28a | | 28b | | 28c | | 29 | | 30b |

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. TAMMY BALDWIN FOR SENATE

B. TAMMY BALDWIN FOR SENATE

20.00

C. TAMMY BALDWIN FOR SENATE

A diagram showing a 3x3 grid. The first row contains the numbers 12, 20, and 2017. The second row is empty. The third row is empty.

5.00

35.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 91 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISONState
WIZip Code
53701

Purpose of Disbursement

ERMK: THERESA STANISICH-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

BALDWIN, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: WI

District:

Category/
Type

Date of Disbursement

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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 0 | | | | 7 |

FEC Identification Number

C C00326801**Transaction ID : EXPB16516**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISONState
WIZip Code
53701

Purpose of Disbursement

ERMK: JEFF LEITNER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

BALDWIN, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: WI

District:

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 0 | | | | 7 |

FEC Identification Number

C C00326801**Transaction ID : EXPB16517**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELECTING WOMEN BAY AREA PAC

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Purpose of Disbursement

ERMK: TRICIA HERRICK-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ELECTING WOMEN BAY AREA PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 7 | | | | 7 |

FEC Identification Number

C C00585687**Transaction ID : EXPB16561**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1015.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 92 OF 109

☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCK

State
ND

Zip Code
58502

Purpose of Disbursement

ERMK: DONNA MAY-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

HEITKAMP, HEIDI, , ,

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State: ND

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 27 / 2017

FEC Identification Number

C C00505552

Transaction ID : EXPB16527

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCK

State
ND

Zip Code
58502

Purpose of Disbursement

ERMK: SUZANNE LAFETRA-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

HEITKAMP, HEIDI, , ,

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State: ND

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 27 / 2017

FEC Identification Number

C C00505552

Transaction ID : EXPB16528

Amount of Each Disbursement this Period

330.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCK

State
ND

Zip Code
58502

Purpose of Disbursement

ERMK: RANDALL MCGAUGH-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

HEITKAMP, HEIDI, , ,

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State: ND

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 27 / 2017

FEC Identification Number

C C00505552

Transaction ID : EXPB16540

Amount of Each Disbursement this Period

10.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

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

345.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 93 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCKState
NDZip Code
58502

Purpose of Disbursement

ERMK: ELIZABETH COLTON-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

HEITKAMP, HEIDI, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: ND

District:

Category/
Type

Date of Disbursement

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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 7 | | | | |

FEC Identification Number

C C00505552**Transaction ID : EXPB16546**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUISState
MOZip Code
63130

Purpose of Disbursement

ERMK: DONNA MAY-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

MCCASKILL, CLAIRE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MO

District:

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 7 | | | | |

FEC Identification Number

C C00577148**Transaction ID : EXPB16529**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUISState
MOZip Code
63130

Purpose of Disbursement

ERMK: SUZANNE LAFETRA-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

MCCASKILL, CLAIRE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MO

District:

Category/
Type

Date of Disbursement

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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 7 | | | | |

FEC Identification Number

C C00577148**Transaction ID : EXPB16530**

Amount of Each Disbursement this Period

330.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| | | | | | |
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| 4 | 3 | 5 | . | 0 | 0 |
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 94 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUISState
MOZip Code
63130

Purpose of Disbursement

ERMK: RANDALL MCGAUGH-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name

MCCASKILL, CLAIRE, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MO

District:

Date of Disbursement

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|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 7 | | | | |

FEC Identification Number

C C00577148**Transaction ID : EXPB16541**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUISState
MOZip Code
63130

Purpose of Disbursement

ERMK: ELIZABETH COLTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name

MCCASKILL, CLAIRE, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MO

District:

Date of Disbursement

| | | | | | | | | | | | | | |
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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 7 | | | | |

FEC Identification Number

C C00577148**Transaction ID : EXPB16547**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: DONNA MAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: NV

District: 03

Date of Disbursement

| | | | | | | | | | | | | | |
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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 7 | | | | |

FEC Identification Number

C C00606939**Transaction ID : EXPB16531**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 95 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: SUZANNE LAFETRA-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NV

District: 03

Date of Disbursement

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| 1 | 2 | | | | | | | 2 | 7 | | | | |

FEC Identification Number

C C00606939**Transaction ID : EXPB16532**

Amount of Each Disbursement this Period

330.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: RANDALL MCGAUGH-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NV

District: 03

Date of Disbursement

| | | | | | | | | | | | | | |
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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 7 | | | | |

FEC Identification Number

C C00606939**Transaction ID : EXPB16542**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: ELIZABETH COLTON-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NV

District: 03

Date of Disbursement

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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 7 | | | | |

FEC Identification Number

C C00606939**Transaction ID : EXPB16548**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| | | | | | | | | | | | | | |
|---|---|---|---|--|--|--|--|--|--|--|--|--|--|
| 4 | 4 | 0 | 0 | | | | | | | | | | |
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 96 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: DONNA MAY-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

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| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16533**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: TENAYA EGBERT-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16534**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: SUZANNE LAFETRA-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16535**

Amount of Each Disbursement this Period

330.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

345.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 97 OF 109

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: RANDALL MCGAUGH-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16543**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SINEMA FOR ARIZONA

Mailing Address 600 PENNSYLVANIA AVENUE SE, SUITE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: ELIZABETH COLTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name

SINEMA, KYRSTEN, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2017 |

FEC Identification Number

C C00508804**Transaction ID : EXPB16549**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826

Purpose of Disbursement

ERMK: DONNA MAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MI

District:

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2017 |

FEC Identification Number

C C00344473**Transaction ID : EXPB16536**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

115.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826

Purpose of Disbursement

ERMK: RANDALL MCGAUGH-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MI

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 7 | | | | |

FEC Identification Number

C C00344473**Transaction ID : EXPB16544**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISONState
WIZip Code
53701

Purpose of Disbursement

ERMK: DONNA MAY-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

BALDWIN, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 7 | | | | |

FEC Identification Number

C C00326801**Transaction ID : EXPB16538**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISONState
WIZip Code
53701

Purpose of Disbursement

ERMK: SUZANNE LAFETRA-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

BALDWIN, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

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| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | | | | | 2 | 7 | | | | |

FEC Identification Number

C C00326801**Transaction ID : EXPB16539**

Amount of Each Disbursement this Period

330.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

345.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 99 OF 109

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| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISONState
WIZip Code
53701

Purpose of Disbursement

ERMK: RANDALL MCGAUGH-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

BALDWIN, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: WI

District:

Category/
Type

Date of Disbursement

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| 12 | / | 27 | / | 2017 |

FEC Identification Number

C C00326801**Transaction ID : EXPB16545**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISONState
WIZip Code
53701

Purpose of Disbursement

ERMK: ELIZABETH COLTON-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

BALDWIN, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: WI

District:

Category/
Type

Date of Disbursement

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| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2017 |

FEC Identification Number

C C00326801**Transaction ID : EXPB16550**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

| | | | | |
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FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

110.00

20065.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. LAUDER, GARY, , ,

Mailing Address 88 MERCEDES LN

City
ATHERTONState
CAZip Code
94027Purpose of Disbursement
REFUND

010

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| 12 | | | | 12 | | | | 2017 | | | | | |

FEC Identification Number

C

Transaction ID : EXPB16649

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

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

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| | | | | | | | | | | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| | | | | | | | | | | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2500.00

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

2500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 101 OF 109

| | | | | |
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| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CHERYL TURPIN FOR VIRGINIA BEACH

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 27 | | 2017 |

Mailing Address 4540 PRINCESS ANNE ROAD
SUITE 114 #189City
VIRGINIA BEACHState
VAZip Code
23462Purpose of Disbursement
ERMK: SUKIE STANLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED
Candidate Name**TURPIN, CHERYL, , ,**Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 85

24TCategory/
Type

FEC Identification Number

C**Transaction ID : EXPB16551**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CROWLEYFORVA98TH

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 27 | | 2017 |

Mailing Address PO BOX 298

City
PORT HAYWOODState
VAZip Code
23138Purpose of Disbursement
ERMK: SUKIE STANLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED
Candidate Name**CROWLEY, SHIELA, , ,**Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 98

24TCategory/
Type

FEC Identification Number

C**Transaction ID : EXPB16552**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH GUZMAN FOR DELEGATE

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 27 | | 2017 |

Mailing Address PO BOX 1818

City
WOODBIDGEState
VAZip Code
22195Purpose of Disbursement
ERMK: SUKIE STANLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED
Candidate Name**GUZMAN, ELIZABETH, , ,**Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 31

24TCategory/
Type

FEC Identification Number

C**Transaction ID : EXPB16553**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | |
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| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DANICA ROEM

Mailing Address PO BOX 726

City
MANASSASState
VAZip Code
20113

Purpose of Disbursement

ERMK: SUKIE STANLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED
Candidate Name**ROEM, DANICA, , ,**

Office Sought:

☐ House☐ Senate☐ President

State: VA

District: 13

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

Date of Disbursement

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| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 12 | | | | 27 | | | | 2017 | | | | | |

FEC Identification Number

C**Transaction ID : EXPB16554**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JENNIFER CARROLL FOY FOR DELEGATE

Mailing Address 2715 MCGUFFEYS CT.

City
WOODBIDGEState
CAZip Code
22191

Purpose of Disbursement

ERMK: SUKIE STANLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED
Candidate Name**CARROLL, JENNIFER, , ,**

Office Sought:

☐ House☐ Senate☐ President

State: VA

District: 02

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

Date of Disbursement

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| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 12 | | | | 27 | | | | 2017 | | | | | |

FEC Identification Number

C**Transaction ID : EXPB16555**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KARRIE DELANEY FOR DELEGATE

Mailing Address PO BOX 230542

City
CENTREVILLEState
VAZip Code
20120

Purpose of Disbursement

ERMK: SUKIE STANLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED
Candidate Name**DELANEY, KARRIE, , ,**

Office Sought:

☐ House☐ Senate☐ President

State: VA

District: 67

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

Date of Disbursement

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|----|---|---|---|----|---|---|---|------|---|---|---|---|---|
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| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 12 | | | | 27 | | | | 2017 | | | | | |

FEC Identification Number

C**Transaction ID : EXPB16556**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATHLEEN MURPHY FOR DELEGATE

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 27 | | 2017 |

Mailing Address PO BOX 146

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

ERMK: SUKIE STANLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

MURPHY, KATHLEEN, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: VA

District: 34

24T

Category/
Type

FEC Identification Number

C

Transaction ID : EXPB16557

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATHY TRAN FOR DELEGATE

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 27 | | 2017 |

Mailing Address PO BOX 2731

City
SPRINGFIELDState
VAZip Code
22152

Purpose of Disbursement

ERMK: SUKIE STANLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

TRAN, KATHY, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: VA

District: 42

24T

Category/
Type

FEC Identification Number

C

Transaction ID : EXPB16558

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MICHELLE FOR DELEGATE

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 27 | | 2017 |

Mailing Address 112 BELL CREEK DRIVE

City
STAUNTONState
VAZip Code
24401

Purpose of Disbursement

ERMK: SUKIE STANLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

EDWARDS, MICHELLE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: VA

District: 20

24T

Category/
Type

FEC Identification Number

C

Transaction ID : EXPB16559

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 104 OF 109

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

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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MORGAN GOODMAN FOR VIRGINIA

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 27 | | 2017 |

Mailing Address 9468 MANORWOOD DRIVE

City
MECHANICSVILLEState
VAZip Code
23116

Purpose of Disbursement

ERMK: SUKIE STANLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

GOODMAN, MORGAN, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: VA

District: 55

24T

Category/
Type

FEC Identification Number

C

Transaction ID : EXPB16560

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | | | | |

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | | | | |

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5.00

50.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 105 OF 109

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HANSON BRIDGETT LLPNature of Debt (Purpose):
LEGAL AND COMPLIANCE

Mailing Address 425 MARKET STREET, 26TH FLOOR

City
SAN FRANCISCOState
CAZip Code
94105

Outstanding Balance Beginning This Period

1305.00

Transaction ID : PAYD3367

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1305.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUPNature of Debt (Purpose):
COMPLIANCE SERVICES

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

1731.87

Transaction ID : PAYD11385

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1731.87

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUPNature of Debt (Purpose):
COMPLIANCE SERVICES

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

2501.05

Transaction ID : PAYD12409

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2501.05

1) **SUBTOTALS** This Period This Page (optional)..... ►

5537.92

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 106 OF 109

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUPNature of Debt (Purpose):
COMPLIANCE SERVICES

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

2348.33

Transaction ID : PAYD13599

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2348.33

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUPNature of Debt (Purpose):
COMPLIANCE SERVICES

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

1132.50

Transaction ID : PAYD13600

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1132.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUPNature of Debt (Purpose):
COMPLIANCE SERVICES

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

1282.50

Transaction ID : PAYD12795

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1282.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

4763.33

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 107 OF 109

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUPNature of Debt (Purpose):
COMPLIANCE SERVICES

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

963.75

Transaction ID : PAYD13601

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

963.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUPNature of Debt (Purpose):
COMPLIANCE SERVICES

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

851.25

Transaction ID : PAYD14704

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

851.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUPNature of Debt (Purpose):
COMPLIANCE SERVICES

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD16656

Amount Incurred This Period

2467.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

2467.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

4282.50

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SD10

Transaction ID : PAYD14704

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 109 OF 109

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10
NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUPNature of Debt (Purpose):
COMPLIANCE SERVICES

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD16657

Amount Incurred This Period

2077.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

2077.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

2077.50

2) **TOTALS** This Period (last page this line number only)..... ►

16661.25

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

16661.25