

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 1016 LINCOLN BLVD., SUITE 303  
 Check if different than previously reported. (ACC)  
SAN FRANCISCO CA 94129

2. **FEC IDENTIFICATION NUMBER** C00450098  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 06 01 2008 through 06 30 2008

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

Type or Print Name of Treasurer JOAN STECKLER

Signature of Treasurer Electronically Filed by JOAN STECKLER Date 07 18 2008

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
WOMENCOUNT PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		0.00
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	61774.62									
(c) Total Receipts (from Line 19) .....	75306.20	427721.04								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	137080.82	427721.04								
7. Total Disbursements (from Line 31) .....	50997.70	341637.92								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	86083.12	86083.12								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	10850.78									

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**

Write or Type Committee Name  
WOMENCOUNT PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	59179.00	392015.40
(i) Itemized (use Schedule A) .....	15777.20	35205.64
(ii) Unitemized .....	74956.20	427221.04
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	350.00	500.00
(c) Other Political Committees (such as PACs) .....	75306.20	427721.04
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
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.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	75306.20	427721.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	75306.20	427721.04

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	30269.70	32388.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	30269.70	32388.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	3500.00
24. Independent Expenditure (use Schedule E) .....	19728.00	304749.87
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	1000.00	1000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	1000.00	1000.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	50997.70	341637.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50997.70	341637.92

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	75306.20	427721.04
34. Total Contribution Refunds (from Line 28(d)) .....	1000.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	74306.20	426721.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	30269.70	32388.05
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	30269.70	32388.05

**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 6 / 108
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) JEHMU GREENE	Date of Receipt MM / DD / YYYY 06 / 01 / 2008
	Mailing Address 10813 PALL MALL DRIVE	<b>Transaction ID:</b> INC.A.1203
	City State Zip Code AUSTIN TX 78748	Amount of Each Receipt this Period 64.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer NONE	Occupation UNEMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.12	

<b>B.</b>	Full Name (Last, First, Middle Initial) ROSEMARY CAMPOSANO	Date of Receipt MM / DD / YYYY 06 / 02 / 2008
	Mailing Address 505 SAN FELICIA WAY	<b>Transaction ID:</b> INC.A.892
	City State Zip Code LOS ALTOS CA 94022	Amount of Each Receipt this Period 1060.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer NONE	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4110.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) DALE DJERASSI	Date of Receipt MM / DD / YYYY 06 / 02 / 2008
	Mailing Address 2600 BEAR GULCH ROAD	<b>Transaction ID:</b> INC.A.635
	City State Zip Code WOODSIDE CA 94602	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer SELF EMPLOYED/SAME NAME	Occupation FILMMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2124.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**WOMENCOUNT PAC**

**A.** Full Name (Last, First, Middle Initial)  
**SONIA E. GARDNER**

Mailing Address **255 W. 84TH STREET, APT. 2A**

City **NEW YORK** State **NY** Zip Code **10024**

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

Name of Employer **AVENUE CAPITAL** Occupation **MANAGING PARTNER**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt **06 / 02 / 2008**  
**Transaction ID: INC.A.636**  
 Amount of Each Receipt this Period **1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**FRANCES PEPPER**

Mailing Address **233 OLIVER ROAD**

City **CINCINNATI** State **OH** Zip Code **45215**

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

Name of Employer **NONE** Occupation **UNEMPLOYED**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1025.00**

Date of Receipt **06 / 02 / 2008**  
**Transaction ID: INC.A.647**  
 Amount of Each Receipt this Period **1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**CHARLENE BICKFORD**

Mailing Address **3220 N 5TH STREET**

City **ARLINGTON** State **VA** Zip Code **22201**

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

Name of Employer **GEORGE WASHINGTON UNIVERSITY** Occupation **PROJECT DIRECTOR**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **06 / 03 / 2008**  
**Transaction ID: INC.A.656**  
 Amount of Each Receipt this Period **250.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) KATHLEEN BURGESS	Date of Receipt MM / DD / YYYY 06 / 03 / 2008
	Mailing Address 812 EVERNIA COURT	<b>Transaction ID:</b> INC.A.661
	City State Zip Code GENEVA IL 60134	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation COOK COUNTY ADMINISTRATIVE ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) SUZANNE GAMLEN	Date of Receipt MM / DD / YYYY 06 / 03 / 2008
	Mailing Address 107 TAYLOR STREET	<b>Transaction ID:</b> INC.A.29
	City State Zip Code SAN RAFAEL CA 94901	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation PAT FRANKLYN ASSOCIATES PARALEGAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) LORRAINE GNECCO	Date of Receipt MM / DD / YYYY 06 / 03 / 2008
	Mailing Address 4439 EVANS AVENUE	<b>Transaction ID:</b> INC.A.651
	City State Zip Code OAKLAND CA 94602	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation EMBARCADERO TECHNOLOGIES VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> 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 9 / 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) MARY KLENZ	Date of Receipt MM / DD / YYYY 06 / 03 / 2008
	Mailing Address 7404 SHERWOOD FOREST DRIVE	<b>Transaction ID:</b> INC.A.653
	City State Zip Code CHARLOTTE NC 28226	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NONE Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) BELINDA MUNOZ	Date of Receipt MM / DD / YYYY 06 / 03 / 2008
	Mailing Address PO BOX 591204	<b>Transaction ID:</b> INC.A.662
	City State Zip Code SAN FRANCISCO CA 94120-4	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer OFFICE OF SUSIE AND MARK BUELL Occupation DIR. POLITICAL & CHARITABLE AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) DARRAGH MURPHY	Date of Receipt MM / DD / YYYY 06 / 03 / 2008
	Mailing Address 8 BEDFORD ROAD	<b>Transaction ID:</b> INC.A.658
	City State Zip Code CARLISLE MA 01741	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer PUMA PAC Occupation POLITICAL ACTIVIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	950.00
<b>TOTAL</b> 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 10 / 108  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
CE PALMER-JOHNSON

Mailing Address 2151 JAMIESON AVENUE UNIT 901-902

City State Zip Code  
ALEXANDRIA VA 22314

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

Name of Employer Occupation  
NSTI EPIDEMIOLOGIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 03 / 2008

**Transaction ID:** INC.A.650

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
HAZEL RIGBY

Mailing Address 330 NORTH PITT STREET

City State Zip Code  
ALEXANDRIA VA 22314

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 03 / 2008

**Transaction ID:** INC.A.652

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
MARGARET TAKEI-GUTIERREZ

Mailing Address 776 17TH AVENUE

City State Zip Code  
SAN FRANCISCO CA 94121

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

Name of Employer Occupation  
OFFICE OF MARK AND BUELL PERSONAL ASSISTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 03 / 2008

**Transaction ID:** INC.A.660

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

**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 / 108
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) LOUISE GUND	Date of Receipt MM / DD / YYYY 06 / 05 / 2008
	Mailing Address 127 PUBLIC SQUARE, 17TH FLOOR	<b>Transaction ID:</b> INC.A.664
	City State Zip Code CLEVELAND OH 44114	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation SELF EMPLOYED/SAME NAME BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) SUSAN BORDEN	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 800 FIFTH AVE	<b>Transaction ID:</b> INC.A.771
	City State Zip Code NEW YORK NY 10065	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation BUMPER DEVELOPMENT CORP BUSINESS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MARGARET CAFARELLI	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 737 ALTURAS DEL SOL	<b>Transaction ID:</b> INC.A.762
	City State Zip Code SANTA BARBARA CA 93103	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation SELF EMPLOYED/SAME NAME REAL ESTATE INVESTMENT AND DEVELOPMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3000.00
<b>TOTAL</b> 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 12 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
MARY B. CRANSTON

Mailing Address 2957 PACIFIC AVE

City State Zip Code  
SAN FRANCISCO CA 94115

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

Name of Employer Occupation  
PILLSBURY ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** INC.A.725

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
SUNNY DUPREE, ESQ

Mailing Address 1010 MEMORIAL DRIVE, #19ABC

City State Zip Code  
CAMBRIDGE MA 02138

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

Name of Employer Occupation  
SELF EMPLOYED/SAME NAME ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** INC.A.768

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
ADELLA FEINBERG

Mailing Address 50 LAUREL HILL CT

City State Zip Code  
SAN MATEO CA 94402

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

Name of Employer Occupation  
NONE UNEMPLOYED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** INC.A.727

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **700.00**

**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 13 / 108  
(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

**A.**

Full Name (Last, First, Middle Initial)  
SANDY FORTIER

Mailing Address 3265 N. MAPLE RD

City State Zip Code  
ANN ARBOR MI 48105

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

Name of Employer Occupation  
PRIVATE PRACTICE/SELF PSYCHOTHERAPIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: INC.A.697

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
RITA FREEDMAN

Mailing Address 384 WOODLANDS RD

City State Zip Code  
HARRISON NY 10528

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

Name of Employer Occupation  
SELF EMPLOYED/SAME NAME PSYCHOLOGIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: INC.A.736

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
JANE GREENSPUN GALE

Mailing Address 6722 NO. RAINBOW

City State Zip Code  
LAS VEGAS NV 89131

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

Name of Employer Occupation  
GREENSPUN CORP EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: INC.A.750

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5750.00**

**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 14 / 108  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.**

Full Name (Last, First, Middle Initial)  
JODY HOFFER GITTELL

Mailing Address 404 SOUTH STREET

City PORTSMOUTH State NH Zip Code 03801

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

Name of Employer BRANDEIS UNIVERSITY Occupation PROFESSOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 06 / 2008

Transaction ID: INC.A.706

Amount of Each Receipt this Period: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
MONICA A. GRAHAM

Mailing Address 20 BORDEN LANE

City EAST HAMPTON State NY Zip Code 11937

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

Name of Employer GRAHAM PARTNERS Occupation FINANCE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 06 / 2008

Transaction ID: INC.A.670

Amount of Each Receipt this Period: 5000.00

**C.**

Full Name (Last, First, Middle Initial)  
LORRAINE J. HARITON

Mailing Address 27900 ROBLE BLANCO COURT

City LOS ALTOS HILLS State CA Zip Code 94022

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 06 / 06 / 2008

Transaction ID: INC.A.744

Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5750.00

**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 / 108  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.**

Full Name (Last, First, Middle Initial)  
LORRAINE J. HARITON

Mailing Address 27900 ROBLE BLANCO COURT

City State Zip Code  
LOS ALTOS HILLS CA 94022

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: INC.A.735

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
TERESA HICKOK

Mailing Address 4106 PASEO DE LA VISTA

City State Zip Code  
BONITA CA 91902

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

Name of Employer SELF EMPLOYED/SAME NAME Occupation MANUFACTURER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: INC.A.717

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
CHRISTINE JAHNKE

Mailing Address 5726 MACARTHUR BLVD., NW

City State Zip Code  
WASHINGTON DC 20016

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

Name of Employer SELF-EMPLOYED/SAME NAME Occupation COMMUNICATIONS CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: INC.A.674

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**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 16 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
BRIELLE JOHNCK

Mailing Address 330 CENTRAL AVE

City State Zip Code  
MENLO PARK CA 94025

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

**Transaction ID:** INC.A.732

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
CHRISTOPHER KENNEDY

Mailing Address 6691 SOUTH LAND PARK DRIVE

City State Zip Code  
SACRAMENTO CA 95831

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

Name of Employer SELF EMPLOYED/SAME NAME Occupation ENVIRONMENTAL CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

**Transaction ID:** INC.A.701

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
SUSAN LALLY

Mailing Address 382 EUREKA STREET

City State Zip Code  
SAN FRANCISCO CA 94114

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

Name of Employer ADOBE Occupation MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

**Transaction ID:** INC.A.729

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **550.00**

**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 / 108  
(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
							17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.**

Full Name (Last, First, Middle Initial)  
GARRY MAURO

Mailing Address 2208 TOWNES LANE

City State Zip Code  
AUSTIN TX 78703

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

Name of Employer Occupation  
SELF EMPLOYED/SAME NAME ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** INC.A.678

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
LYNN MEDAJ

Mailing Address 104 ELMCREST CIRCLE

City State Zip Code  
LIVERPOOL NY 13090

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

Name of Employer Occupation  
SYRACUSE CITY SCHOOLS TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** INC.A.724

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MARY ANNE O'NEIL

Mailing Address 717 ABBOTT RD

City State Zip Code  
WALLA WALLA WA 99362

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

Name of Employer Occupation  
WHITMAN COLLEGE TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** INC.A.708

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1200.00**

**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 18 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
CAROLYN PEKAR

Mailing Address 21 CARRIAGE LANE

City State Zip Code  
STOW MA 01775

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

Name of Employer Occupation  
PALOMAR MEDICAL DIRECTOR OF CLINICAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** INC.A.764

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
CHARLES ROSEN

Mailing Address 174 UPPER MOUNTAIN AVE

City State Zip Code  
MONTCLAIR NJ 07042

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

Name of Employer Occupation  
AMALGAMATED, LLC CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** INC.A.675

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
NONA RUSSELL

Mailing Address 1000 NORTH STATE STREET

City State Zip Code  
CHICAGO IL 60610

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

Name of Employer Occupation  
NONE UNEMPLOYED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2560.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** INC.A.723

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1450.00

**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 19 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
ANNE SCHOWE  
 Mailing Address 930 MONTE DRIVE  
 City State Zip Code  
 SANTA BARBARA CA 93110  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 0 6 / 2 0 0 8  
**Transaction ID:** INC.A.772  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

**B.** Full Name (Last, First, Middle Initial)  
BARBARA SKRIVANEK  
 Mailing Address 2200 NEVADA AV S APT 207  
 City State Zip Code  
 MINNEAPOLIS MN 55426  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 0 6 / 2 0 0 8  
**Transaction ID:** INC.A.756  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE STOREFRONT GROUP Occupation ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

**C.** Full Name (Last, First, Middle Initial)  
MARY SPENCE  
 Mailing Address 403 LAKE CLIFF TRAIL  
 City State Zip Code  
 AUSTIN TX 78746  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 0 6 / 2 0 0 8  
**Transaction ID:** INC.A.680  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 750.00  
**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 20 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
BRENDA GALE WILLETT

Mailing Address 117 PINE STREET

City State Zip Code  
NACOGDOCHES TX 75965

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

Name of Employer Occupation  
LONE STAR LEGAL AID LEGAL SERVICES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** INC.A.721

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
BAIFANG SCHELL

Mailing Address 1045 KEELER AVE

City State Zip Code  
BERKELEY CA 94708-140

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2008

**Transaction ID:** INC.A.773

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
LINDA CASEY

Mailing Address 6711 GLENHURST

City State Zip Code  
DALLAS TX 75254

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

Name of Employer Occupation  
OFFICE OF DR. FRANKLIN CA- SEY SECRETARY/OFFICE MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2008

**Transaction ID:** INC.A.782

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00

**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 21 / 108
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) SUSAN B. MAGEE	Date of Receipt MM / DD / YYYY 06 / 10 / 2008
	Mailing Address 4000 CATHEDRAL AVENUE, NW #604B	<b>Transaction ID:</b> INC.A.784
	City State Zip Code WASHINGTON DC 20016	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation SELF-EMPLOYED, SAME NAME WRITER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MURIEL SCHNIEROW	Date of Receipt MM / DD / YYYY 06 / 10 / 2008
	Mailing Address 407 FRANKLIN 5G	<b>Transaction ID:</b> INC.A.779
	City State Zip Code RIVER FOREST IL 60305	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation NONE UNEMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) CAREN Z. TURNER	Date of Receipt MM / DD / YYYY 06 / 10 / 2008
	Mailing Address 16 WILLOW LANE	<b>Transaction ID:</b> INC.A.786
	City State Zip Code TENAFLY NJ 07670	Amount of Each Receipt this Period 4500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation TURNER GOVERNMENT AND PUBLIC AFFAIRS PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5100.00
<b>TOTAL</b> 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 22 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
ROSEMARY GEORGE STRALEY

Mailing Address 233 PROSPECT STREET P209

City State Zip Code  
LA JOLLA CA 92037

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
06 / 11 / 2008

Transaction ID: INC.A.787

Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
NADIA GOLDING

Mailing Address 1942 RHODE ISLAND AVENUE

City State Zip Code  
MCLEAN VA 22101

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: MM / DD / YYYY  
06 / 12 / 2008

Transaction ID: INC.A.793

Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
MARSHA LAUFER

Mailing Address 178 OLD FIELD ROAD

City State Zip Code  
SETAUKET NY 11733

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

Name of Employer N/A Occupation NONE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY  
06 / 12 / 2008

Transaction ID: INC.A.797

Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1600.00

**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 23 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
RACHEL LAVINE

Mailing Address 37 WEST 12TH STREET

City State Zip Code  
NEW YORK NY 10011

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

Name of Employer SELF EMPLOYED/SAME NAME      Occupation ATTORNEY

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** INC.A.790

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
ALICE R. VAN ROYEN

Mailing Address 6301 EMERALD DRIVE

City State Zip Code  
ROCKLIN CA 95677

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

Name of Employer GLOBAL MEDICAL STAFFING      Occupation PHYSICIAN

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** INC.A.789

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
MARIANNE ZORZA

Mailing Address 538 S. FIFTH AVE

City State Zip Code  
ANN ARBOR MI 48104

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

Name of Employer SELF EMPLOYED/SAME NAME      Occupation SCIENTIST

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      450.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** INC.A.796

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

**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 24 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
SUNNY DUPREE, ESQ  
Mailing Address 1010 MEMORIAL DRIVE, #19ABC  
City CAMBRIDGE State MA Zip Code 02138  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF EMPLOYED/SAME NAME Occupation ATTORNEY  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1100.00  
Date of Receipt 06 / 13 / 2008  
Transaction ID: INC.A.807  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
LYNN ELAM  
Mailing Address 843 ALBEROSKY WAY  
City BATAVIA State IL Zip Code 60510  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HINSDALE PUBLIC LIBRARY Occupation DIRECTOR  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 06 / 13 / 2008  
Transaction ID: INC.A.824  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
HEIDI FELDMAN  
Mailing Address 2118 BANCROFT PLACE NW  
City WASHINGTON State DC Zip Code 20008  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GEORGETOWN UNIVERSITY LAW CENTER Occupation PROFESSOR OF LAW  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 06 / 13 / 2008  
Transaction ID: INC.A.831  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2250.00  
**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 25 / 108

(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

**A.**

Full Name (Last, First, Middle Initial)

ANN HAFTER

Mailing Address 1417 37TH ST

City State Zip Code  
SACRAMENTO CA 95816

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

Name of Employer Occupation  
SELF EMPLOYED/SAME NAME CONCIERGE SERVICES

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: INC.A.842

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

LAUREL HEADLEY

Mailing Address 31 COLORADO AVENUE

City State Zip Code  
BERKELEY CA 94707

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

Name of Employer Occupation  
SELF EMPLOYED/SAME NAME ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: INC.A.812

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

ROBERTA HUMPHREYS

Mailing Address 594 POND VIEW DRIVE

City State Zip Code  
MENDOTA HTS MN 55120

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

Name of Employer Occupation  
UNIVERSITY OF MINNESOTA PROFESSOR

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: INC.A.817

Amount of Each Receipt this Period

250.00

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

600.00

**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 26 / 108

(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**

**A.**

Full Name (Last, First, Middle Initial)  
**MARCIA KIMBALL**

Mailing Address **395 OLD TRAIL ROAD**

City **SANIBEL** State **FL** Zip Code **33957**

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

Name of Employer **GIGGLES, INC.** Occupation **BUSINESS OWNER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt **06 / 16 / 2008**

**Transaction ID: INC.A.848**

Amount of Each Receipt this Period **1000.00**

**B.**

Full Name (Last, First, Middle Initial)  
**BRENDA GALE WILLETT**

Mailing Address **117 PINE STREET**

City **NACOGDOCHES** State **TX** Zip Code **75965**

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

Name of Employer **LONE STAR LEGAL AID** Occupation **LEGAL SERVICES**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **06 / 16 / 2008**

**Transaction ID: INC.A.853**

Amount of Each Receipt this Period **200.00**

**C.**

Full Name (Last, First, Middle Initial)  
**JANE A LAPINSKI**

Mailing Address **10717 W HIGHWAY 42**

City **GOSHEN** State **KY** Zip Code **40026**

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

Name of Employer **NONE** Occupation **UNEMPLOYED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt **06 / 18 / 2008**

**Transaction ID: INC.A.888**

Amount of Each Receipt this Period **200.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1400.00**

**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 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
SUSAN STERN

Mailing Address 39 PARK ROAD

City State Zip Code  
SCARSDALE NY 10583

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

Name of Employer NONE Occupation VOLUNTEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
06 / 18 / 2008

**Transaction ID:** INC.A.874

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
CRISTINA C. ARGUEDAS

Mailing Address 803 HEARST AVENUE

City State Zip Code  
BERKELEY CA 94710

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

Name of Employer ARGUEDAS, CASSMAN AND HEADLEY Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** INC.A.1002

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
BIERTA BARFOD

Mailing Address 337 NE 56TH STREET

City State Zip Code  
SEATTLE WA 98105

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

Name of Employer KATSUTA HOSPITAL Occupation EDITOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** INC.A.956

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1200.00

**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 28 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
BONNIE BERGER

Mailing Address 220 BOYLSTON STREET, #1618

City State Zip Code  
BOSTON MA 02116

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt: 06 / 20 / 2008  
Transaction ID: INC.A.1094  
Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
HEATHER CAPELL

Mailing Address 1725 20TH STREET NW, UNIT F1

City State Zip Code  
WASHINGTON DC 20009

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

Name of Employer DEWEY AND LEBOEUF Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 06 / 20 / 2008  
Transaction ID: INC.A.1060  
Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
DIANA CONTI

Mailing Address 309 VIA RECODO

City State Zip Code  
MILL VALLEY CA 94941

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

Name of Employer PARCA Occupation EXECUTIVE DIRECTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 06 / 20 / 2008  
Transaction ID: INC.A.1021  
Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1550.00

**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 29 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
DIANA CONTI

Mailing Address 309 VIA RECODO

City State Zip Code  
MILL VALLEY CA 94941

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

Name of Employer Occupation  
PARCA EXECUTIVE DIRECTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

**Transaction ID:** INC.A.909

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
KAREN FELDMAN

Mailing Address 38 PLEASANT VIEW DRIVE

City State Zip Code  
HUDSON NY 12534

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

Name of Employer Occupation  
SELF EMPLOYED/SAME NAME ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

**Transaction ID:** INC.A.953

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
HOLLISE GERSH

Mailing Address 21 SWEET HOLLOW RD

City State Zip Code  
HUNTINGTON NY 11743-653

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

Name of Employer Occupation  
WEST NECK DESIGNS DESIGNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

**Transaction ID:** INC.A.904

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**

**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 30 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
JODY HOFFER GITTELL

Mailing Address 404 SOUTH STREET

City PORTSMOUTH State NH Zip Code 03801

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

Name of Employer BRANDEIS UNIVERSITY Occupation PROFESSOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 20 / 2008

Transaction ID: INC.A.1028

Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
PAUL HAGEN

Mailing Address 5726 MACARTHUR BLVD., NW

City WASHINGTON State DC Zip Code 20016

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

Name of Employer BEVERIDGE AND DIAMOND Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 20 / 2008

Transaction ID: INC.A.1068

Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
ANNE HENDREN

Mailing Address 2655 SW RAVENSVIEW DR

City PORTLAND State OR Zip Code 97201

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

Name of Employer SELF EMPLOYED/SAME NAME Occupation WRITER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 20 / 2008

Transaction ID: INC.A.920

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 550.00

**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 31 / 108  
(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
							17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.**

Full Name (Last, First, Middle Initial)  
ANNE HENDREN

Mailing Address 2655 SW RAVENSVIEW DR

City State Zip Code  
PORTLAND OR 97201

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

Name of Employer  
SELF EMPLOYED/SAME NAME

Occupation  
WRITER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** INC.A.995

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
TERESA HICKOK

Mailing Address 4106 PASEO DE LA VISTA

City State Zip Code  
BONITA CA 91902

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

Name of Employer  
SELF EMPLOYED/SAME NAME

Occupation  
MANUFACTURER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
505.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** INC.A.921

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
TERESA HICKOK

Mailing Address 4106 PASEO DE LA VISTA

City State Zip Code  
BONITA CA 91902

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

Name of Employer  
SELF EMPLOYED/SAME NAME

Occupation  
MANUFACTURER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
505.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** INC.A.923

Amount of Each Receipt this Period  
5.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **280.00**

**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 32 / 108  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.**

Full Name (Last, First, Middle Initial)  
KAREN HOFMEISTER

Mailing Address 2121 KIRBY DRIVE NO. 26NE

City HOUSTON State TX Zip Code 77019

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

Name of Employer SELF EMPLOYED/SAME NAME Occupation WRITER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4333.00

Date of Receipt: 06 / 20 / 2008

Transaction ID: INC.A.1090

Amount of Each Receipt this Period: 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
HEIDI HORNER, PhD

Mailing Address 1263 BUNNY COURT

City ASPEN State CO Zip Code 81611

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

Name of Employer SELF EMPLOYED/SAME NAME Occupation BIOTECH CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 06 / 20 / 2008

Transaction ID: INC.A.946

Amount of Each Receipt this Period: 100.00

**C.**

Full Name (Last, First, Middle Initial)  
ANN HOWE

Mailing Address 1811 PARK DRIVE

City RALEIGH State NC Zip Code 27605

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

Name of Employer NONE Occupation UNEMPLOYED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 20 / 2008

Transaction ID: INC.A.974

Amount of Each Receipt this Period: 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

**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 33 / 108  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
KATHLEEN HUGHES

Mailing Address 839 NORTHAMPTON DR

City PALO ALTO State CA Zip Code 94303

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

Name of Employer NONE Occupation UNEMPLOYED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 20 / 2008  
**Transaction ID: INC.A.987**  
 Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
ROBERTA HUMPHREYS

Mailing Address 594 POND VIEW DRIVE

City MENDOTA HTS State MN Zip Code 55120

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

Name of Employer UNIVERSITY OF MINNESOTA Occupation PROFESSOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 06 / 20 / 2008  
**Transaction ID: INC.A.922**  
 Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
CHRISTINE JAHNKE

Mailing Address 5726 MACARTHUR BLVD., NW

City WASHINGTON State DC Zip Code 20016

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

Name of Employer SELF-EMPLOYED/SAME NAME Occupation COMMUNICATIONS CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 06 / 20 / 2008  
**Transaction ID: INC.A.1052**  
 Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **750.00**

**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 34 / 108

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WOMENCOUNT PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**CHRISTOPHER KENNEDY**

Mailing Address **6691 SOUTH LAND PARK DRIVE**

City **SACRAMENTO** State **CA** Zip Code **95831**

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

Name of Employer **SELF EMPLOYED/SAME NAME** Occupation **ENVIRONMENTAL CONSULTANT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 20 / 2008

**Transaction ID: INC.A.1036**

Amount of Each Receipt this Period 100.00

**B.**

Full Name (Last, First, Middle Initial)  
**DREAMA LAMPA**

Mailing Address **4107 - 18TH ROAD NORTH**

City **ARLINGTON** State **VA** Zip Code **22207**

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

Name of Employer **CRATE & BARREL** Occupation **RETAIL MANAGER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 20 / 2008

**Transaction ID: INC.A.950**

Amount of Each Receipt this Period 100.00

**C.**

Full Name (Last, First, Middle Initial)  
**DEBORAH LOPEZ**

Mailing Address **116 A DAY**

City **SAN FRANCISCO** State **CA** Zip Code **94131**

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

Name of Employer **SELF-EMPLOYED, SAME NAME** Occupation **REALTOR**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 06 / 20 / 2008

**Transaction ID: INC.A.1038**

Amount of Each Receipt this Period 100.00

**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 35 / 108  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.**

Full Name (Last, First, Middle Initial)  
LYNN MEDAJ

Mailing Address 104 ELMCREST CIRCLE

City State Zip Code  
LIVERPOOL NY 13090

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

Name of Employer Occupation  
SYRACUSE CITY SCHOOLS TEACHER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: INC.A.926

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
JUDITH S MERRILL

Mailing Address 10717 CROMWELL DR

City State Zip Code  
DALLAS TX 75229

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

Name of Employer Occupation  
NONE UNEMPLOYED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: INC.A.930

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
HOLLY MILLAR

Mailing Address 1740 BROADWAY NO. 701

City State Zip Code  
SAN FRANCISCO CA 94019

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

Name of Employer Occupation  
SELF-EMPLOYED, SAME NAME CONSULTANT/INVESTOR

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: INC.A.983

Amount of Each Receipt this Period

250.00

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

850.00

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

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

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

FOR LINE NUMBER: PAGE 36 / 108  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
MARY ANNE O'NEIL

Mailing Address 717 ABBOTT RD

City WALLA WALLA State WA Zip Code 99362

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

Name of Employer WHITMAN COLLEGE Occupation TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 20 / 2008

Transaction ID: INC.A.964

Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
AMY PEARL

Mailing Address 555 S. EL MONTE AVENUE

City LOS ALTOS State CA Zip Code 94022

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

Name of Employer SELF-EMPLOYED, SAME NAME Occupation FINANCIAL PLANNING

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 20 / 2008

Transaction ID: INC.A.963

Amount of Each Receipt this Period: 50.00

**C.** Full Name (Last, First, Middle Initial)  
CAROLYN PEKAR

Mailing Address 21 CARRIAGE LANE

City STOW State MA Zip Code 01775

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

Name of Employer PALOMAR MEDICAL Occupation DIRECTOR OF CLINICAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 06 / 20 / 2008

Transaction ID: INC.A.962

Amount of Each Receipt this Period: 100.00

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

**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 37 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
FRANCES PEPPER

Mailing Address 233 OLIVER ROAD

City State Zip Code  
CINCINNATI OH 45215

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

Name of Employer NONE Occupation UNEMPLOYED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1025.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** INC.A.936

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
JACKALYN REEVES

Mailing Address 2771 LA JOLLA AVENUE

City State Zip Code  
SAN JOSE CA 95124

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

Name of Employer MEDIMMUNE Occupation SENIOR ADMINSTRATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** INC.A.1000

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
DONNA ROBBINS

Mailing Address 3266 SWEET DRIVE

City State Zip Code  
LAFAYETTE CA 94549

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** INC.A.1071

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **325.00**

**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 38 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
ANNE H ROSS LYON  
Mailing Address 2439 NORWOOD AVE  
City BOULDER State CO Zip Code 80304  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF EMPLOYED/SAME NAME Occupation EXECUTIVE RECRUITER  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00  
Date of Receipt 06 / 20 / 2008  
Transaction ID: INC.A.1001  
Amount of Each Receipt this Period 200.00

**B.** Full Name (Last, First, Middle Initial)  
LORI SACKLER  
Mailing Address 238 ENGLE ST  
City TENAFLY State NJ Zip Code 07670  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SMITH BARNEY Occupation FINANCIAL ADVISOR  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 06 / 20 / 2008  
Transaction ID: INC.A.948  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
EDMUND SIMS  
Mailing Address 690 WHITE PINE ROAD  
City BUFFALO GROVE State IL Zip Code 60089  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CDW Occupation SALES  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 06 / 20 / 2008  
Transaction ID: INC.A.1011  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1700.00  
**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 39 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
AMY SISKIND BAYER

Mailing Address 4 SKIBO LANE

City MAMRONECK State NY Zip Code 10543

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

Name of Employer NONE Occupation UNEMPLOYED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 06 / 20 / 2008  
**Transaction ID: INC.A.931**  
 Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
MARY SPENCE

Mailing Address 403 LAKE CLIFF TRAIL

City AUSTIN State TX Zip Code 78746

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 06 / 20 / 2008  
**Transaction ID: INC.A.1015**  
 Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
SUSAN STANLEY

Mailing Address 35 E 12TH ST #9C

City NEW YORK State NY Zip Code 10003

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

Name of Employer SELF EMPLOYED/SAME NAME Occupation ART DEALER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 20 / 2008  
**Transaction ID: INC.A.938**  
 Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

**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 40 / 108  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.**

Full Name (Last, First, Middle Initial)  
PAULINE WALTON

Mailing Address 112 STANFORD WAY

City State Zip Code  
SAUSALITO CA 94965

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

Name of Employer NONE Occupation UNEMPLOYED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

Transaction ID: INC.A.1009

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
GAIL YAMNER

Mailing Address 330 DWASLINE ROAD

City State Zip Code  
CLIFTON NJ 07012

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

Name of Employer SELF EMPLOYED/SAME NAME Occupation WRITER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

Transaction ID: INC.A.915

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MARIANNE ZORZA

Mailing Address 538 S. FIFTH AVE

City State Zip Code  
ANN ARBOR MI 48104

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

Name of Employer SELF EMPLOYED/SAME NAME Occupation SCIENTIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2008

Transaction ID: INC.A.907

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **600.00**

**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 41 / 108

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.**

Full Name (Last, First, Middle Initial)  
DALE SCHROEDEL

Mailing Address 320 RUTLEDGE STREET

City State Zip Code  
SAN FRANCISCO CA 94110

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

Name of Employer Occupation  
SELF EMPLOYED/SAME NAME PRIVATE INVESTIGATOR

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: INC.A.1099

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
CLAUDINE BACHER

Mailing Address 24 DOCKSIDE LANE, NO. 101

City State Zip Code  
KEY LARGO FL 33037

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

Name of Employer Occupation  
SAVE AMERICA'S TREASURES FOUNDING CHAIR

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: INC.A.1100

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
MARY KLENZ

Mailing Address 7404 SHERWOOD FOREST DRIVE

City State Zip Code  
CHARLOTTE NC 28226

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: INC.A.1102

Amount of Each Receipt this Period

250.00

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

1450.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	PAGE 42 / 108
	(check only one)	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) DOROTHY KNECHT	Date of Receipt MM / DD / YYYY 06 / 25 / 2008
	Mailing Address 17 BRET HARTE TERRACE	<b>Transaction ID:</b> INC.A.1101
	City State Zip Code SAN FRANCISCO CA 94133-160	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) NANCY BEANG	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 5123 MASSACHUSETTS AVENUE, NW	<b>Transaction ID:</b> INC.A.1158
	City State Zip Code WASHINGTON DC 20016	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NONE Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) DIANA CONTI	Date of Receipt MM / DD / YYYY 06 / 26 / 2008
	Mailing Address 309 VIA RECODO	<b>Transaction ID:</b> INC.A.1140
	City State Zip Code MILL VALLEY CA 94941	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer PARCA Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1100.00
<b>TOTAL</b> 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 43 / 108

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.**

Full Name (Last, First, Middle Initial)  
ADELLA FEINBERG

Mailing Address 50 LAUREL HILL CT

City State Zip Code  
SAN MATEO CA 94402

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

Name of Employer Occupation  
NONE UNEMPLOYED

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	8

Transaction ID: INC.A.1106

Amount of Each Receipt this Period

200.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
SUZANNE GAMLEN

Mailing Address 107 TAYLOR STREET

City State Zip Code  
SAN RAFAEL CA 94901

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

Name of Employer Occupation  
PAT FRANKLYN ASSOCIATES PARALEGAL

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	8

Transaction ID: INC.A.1111

Amount of Each Receipt this Period

50.00
-------

**C.**

Full Name (Last, First, Middle Initial)  
SALLY GREENSPAN

Mailing Address 139 W. 19TH STREET, #5 NE

City State Zip Code  
NEW YORK NY 10011

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	8

Transaction ID: INC.A.1107

Amount of Each Receipt this Period

150.00
--------

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

400.00

**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 44 / 108

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WOMENCOUNT PAC**

**A.**

Full Name (Last, First, Middle Initial)  
ANNE HENDREN

Mailing Address 2655 SW RAVENSVIEW DR

City State Zip Code  
PORTLAND OR 97201

FEC ID number of contributing federal political committee. C

Name of Employer  
SELF EMPLOYED/SAME NAME

Occupation  
WRITER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
06 / 26 / 2008

**Transaction ID:** INC.A.1154

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
ANNE HENDREN

Mailing Address 2655 SW RAVENSVIEW DR

City State Zip Code  
PORTLAND OR 97201

FEC ID number of contributing federal political committee. C

Name of Employer  
SELF EMPLOYED/SAME NAME

Occupation  
WRITER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
06 / 26 / 2008

**Transaction ID:** INC.A.1130

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
KAREN HOFMEISTER

Mailing Address 2121 KIRBY DRIVE NO. 26NE

City State Zip Code  
HOUSTON TX 77019

FEC ID number of contributing federal political committee. C

Name of Employer  
SELF EMPLOYED/SAME NAME

Occupation  
WRITER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4333.00

Date of Receipt  
06 / 26 / 2008

**Transaction ID:** INC.A.1129

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 45 / 108
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) HEIDI HORNER, PhD	Date of Receipt
	Mailing Address 1263 BUNNY COURT	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 26 / 2008
	City State Zip Code ASPEN CO 81611	<b>Transaction ID:</b> INC.A.1131
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 100.00
Name of Employer SELF EMPLOYED/SAME NAME	Occupation BIOTECH CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 200.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ROBERTA HUMPHREYS	Date of Receipt
	Mailing Address 594 POND VIEW DRIVE	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 26 / 2008
	City State Zip Code MENDOTA HTS MN 55120	<b>Transaction ID:</b> INC.A.1155
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 250.00
Name of Employer UNIVERSITY OF MINNESOTA	Occupation PROFESSOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 750.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) EDWARD KIMMEL	Date of Receipt
	Mailing Address 7629 CARROLL AVE	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 26 / 2008
	City State Zip Code TAKOMA PARK MD 20912	<b>Transaction ID:</b> INC.A.1119
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 250.00
Name of Employer SELF EMPLOYED/SAME NAME	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 600.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 46 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
SUSAN LALLY  
 Mailing Address 382 EUREKA STREET  
 City State Zip Code  
 SAN FRANCISCO CA 94114  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 6 / 2 0 0 8  
**Transaction ID:** INC.A.1138  
 Amount of Each Receipt this Period  
 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ADOBE MANAGER  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

**B.** Full Name (Last, First, Middle Initial)  
RICKI LIEBERMAN  
 Mailing Address 610 WEST END AVENUE #11D  
 City State Zip Code  
 NEW YORK NY 10024  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 6 / 2 0 0 8  
**Transaction ID:** INC.A.1141  
 Amount of Each Receipt this Period  
 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED, SAME NAME CONSULTANT  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 200.00

**C.** Full Name (Last, First, Middle Initial)  
MARY ANNE O'NEIL  
 Mailing Address 717 ABBOTT RD  
 City State Zip Code  
 WALLA WALLA WA 99362  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 6 / 2 0 0 8  
**Transaction ID:** INC.A.1113  
 Amount of Each Receipt this Period  
 25.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WHITMAN COLLEGE TEACHER  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 225.00  
**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 47 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
MARY ANNE O'NEIL  
 Mailing Address 717 ABBOTT RD  
 City WALLA WALLA State WA Zip Code 99362  
 Date of Receipt 06 / 26 / 2008  
 Transaction ID: INC.A.1133  
 Amount of Each Receipt this Period 25.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer WHITMAN COLLEGE Occupation TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 250.00

**B.** Full Name (Last, First, Middle Initial)  
ROSINA L. RUBIN  
 Mailing Address 10 TOR TERRACE  
 City NEW YORK CITY State NY Zip Code 10956  
 Date of Receipt 06 / 26 / 2008  
 Transaction ID: INC.A.1124  
 Amount of Each Receipt this Period 250.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer ATTITUDE NEW YORK, INC. Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 750.00

**C.** Full Name (Last, First, Middle Initial)  
MARY SPENCE  
 Mailing Address 403 LAKE CLIFF TRAIL  
 City AUSTIN State TX Zip Code 78746  
 Date of Receipt 06 / 26 / 2008  
 Transaction ID: INC.A.1128  
 Amount of Each Receipt this Period 100.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer NONE Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 600.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 375.00  
**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 48 / 108

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.**

Full Name (Last, First, Middle Initial)  
ALICE R. VAN ROYEN

Mailing Address 6301 EMERALD DRIVE

City State Zip Code  
ROCKLIN CA 95677

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

Name of Employer Occupation  
GLOBAL MEDICAL STAFFING PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: INC.A.1152

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
MARJORIE VANDERBILT

Mailing Address 501 SLATERS LANE, #421

City State Zip Code  
ALEXANDRIA VA 22314

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

Name of Employer Occupation  
AMERICAN ASSOCIATION FOR GERIATRIC PSY LOBBYIST/DIRECTOR OF GOVERNMENT AFFAIR

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: INC.A.1150

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
SUSAN N. WILSON

Mailing Address 40 CONSTITUTION HILL WEST

City State Zip Code  
PRINCETON NJ 08540

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: INC.A.1146

Amount of Each Receipt this Period

500.00

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

850.00

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



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

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

FOR LINE NUMBER: PAGE 49 / 108  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

**A.** Full Name (Last, First, Middle Initial)  
MURIEL SCHNIEROW

Mailing Address 407 FRANKLIN 5G

City State Zip Code  
RIVER FOREST IL 60305

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

Name of Employer Occupation  
NONE UNEMPLOYED

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2008

Transaction ID: INC.A.1170

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	59179.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 / 108
	(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

**A.**

Full Name (Last, First, Middle Initial)  
CAROLYN'S PAC

Mailing Address 49 EAST 92D STREET #1A

City State Zip Code  
NEW YORK NY 10128

FEC ID number of contributing federal political committee. **C** C00341990

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

**Transaction ID:** INC.A.1192

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
STEVE ISRAEL FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 777

City State Zip Code  
DEER PRK NY 11729

FEC ID number of contributing federal political committee. **C** C00358952

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

**Transaction ID:** INC.A.1196

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	350.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

A.	Full Name (Last, First, Middle Initial) WELLS FARGO BANK	Transaction ID: EXP.B.663 Date of Disbursement 06 / 03 / 2008
	Mailing Address 464 CALIFORNIA STREET	Amount of Each Disbursement this Period 20.00
	City SAN FRANCISCO State CA Zip Code 94163	
	Purpose of Disbursement BANK FEE Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: EXP.B.760 Date of Disbursement 06 / 05 / 2008
	Mailing Address 2965 WEST CORPORATE LAKES BOULEVAR	Amount of Each Disbursement this Period 814.20
	City WESTON State FL Zip Code 33331	
	Purpose of Disbursement CREDIT CARD TRANSACTION FEES Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ACTBLUE	Transaction ID: EXP.B.777 Date of Disbursement 06 / 06 / 2008
	Mailing Address 14 ARROW STREET, SUITE 11	Amount of Each Disbursement this Period 894.15
	City CAMBRIDGE State MA Zip Code 02138	
	Purpose of Disbursement FUNDRAISING WEBSITE TRANSACTION FEES Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1728.35
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) WELLS FARGO BANK</p> <p>Mailing Address 464 CALIFORNIA STREET</p> <p>City SAN FRANCISCO State CA Zip Code 94163</p> <p>Purpose of Disbursement BANK FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> EXP.B.1199</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) WELLS FARGO BANK</p> <p>Mailing Address 464 CALIFORNIA STREET</p> <p>City SAN FRANCISCO State CA Zip Code 94163</p> <p>Purpose of Disbursement BANKCARD DISCOUNT FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> EXP.B.1200</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1965.21"/></p> <p>Category/Type: <input type="text" value="003"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) WELLS FARGO BANK</p> <p>Mailing Address 464 CALIFORNIA STREET</p> <p>City SAN FRANCISCO State CA Zip Code 94163</p> <p>Purpose of Disbursement BANKCARD FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> EXP.B.1201</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="52.30"/></p> <p>Category/Type: <input type="text" value="001"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="2020.51"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

A.	Full Name (Last, First, Middle Initial) ACTBLUE	Transaction ID: EXP.B.846 Date of Disbursement 06 / 13 / 2008
	Mailing Address 14 ARROW STREET, SUITE 11	Amount of Each Disbursement this Period 111.09
	City CAMBRIDGE State MA Zip Code 02138	
	Purpose of Disbursement FUNDRAISING WEBSITE TRANSACTION FEES	003 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ROSEMARY CAMPOSANO	Transaction ID: EXP.B.1282 Date of Disbursement 06 / 17 / 2008
	Mailing Address 505 SAN FELICIA WAY	Amount of Each Disbursement this Period 2050.00
	City LOS ALTOS State CA Zip Code 94022	
	Purpose of Disbursement MEMO: NEWSWIRE SERVICE FEES TO BE REIMBURSED	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AP WIDEWORLD PHOTOS	Transaction ID: PDT.B.4 Date of Disbursement 06 / 17 / 2008
	Mailing Address 450 WEST 33RD STREET	Amount of Each Disbursement this Period 1000.00
	City NEW YORK State NY Zip Code 10001	
	Purpose of Disbursement REIMBURSEMENT FOR NEWSWIRE SERVICE FEES TO ROSEMARY CAMPOSANO	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2161.09
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

<b>A.</b> Full Name (Last, First, Middle Initial) PR NEWSWIRE Mailing Address 810 7TH AVENUE, 32ND FLOOR City NEW YORK State NY Zip Code 10019 Purpose of Disbursement REIMBURSEMENT OF NEWSWIRE SERVICE FEES TO ROSEMARY CAMPOSANO Candidate Name	Transaction ID: PDT.B.5 Date of Disbursement 06 / 17 / 2008 Amount of Each Disbursement this Period 1050.00

<b>B.</b> Full Name (Last, First, Middle Initial) ROSEMARY CAMPOSANO Mailing Address 505 SAN FELICIA WAY City LOS ALTOS State CA Zip Code 94022 Purpose of Disbursement MEMO: NEWSWIRE SERVICE FEES TO BE REIMBURSED Candidate Name	Transaction ID: EXP.B.1284 Date of Disbursement 06 / 17 / 2008 Amount of Each Disbursement this Period 1060.00

<b>C.</b> Full Name (Last, First, Middle Initial) PR NEWSWIRE Mailing Address 810 7TH AVENUE, 32ND FLOOR City NEW YORK State NY Zip Code 10019 Purpose of Disbursement REIMBURSEMENT OF NEWSWIRE SERVICE FEES TO ROSEMARY CAMPOSANO Candidate Name	Transaction ID: PDT.B.6 Date of Disbursement 06 / 17 / 2008 Amount of Each Disbursement this Period 1060.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1060.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

A.

Full Name (Last, First, Middle Initial)  
DANA MORRISSEY

Transaction ID: EXP.B.1278  
Date of Disbursement

Mailing Address 2423 LAUREL LANE

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	0	8

City MIDDLETOWN State VA Zip Code 22645

Amount of Each Disbursement this Period

Purpose of Disbursement  
MEMO: COPYING EXPENSES TO BE REIMBURSED

001
Category/ Type

668.87
--------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
FEDEX KINKOS

Transaction ID: PDT.B.3  
Date of Disbursement

Mailing Address 2020 K STREET NW

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	0	8

City WASHINGTON State DC Zip Code 20006

Amount of Each Disbursement this Period

Purpose of Disbursement  
REIMBURSEMENT OF COPYING EXPENSES TO DANA MORRISSEY

001
Category/ Type

597.36
--------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
THE SUTTON LAW FIRM

Transaction ID: EXP.B.867  
Date of Disbursement

Mailing Address 150 POST STREET, SUITE 405

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	0	8

City SAN FRANCISCO State CA Zip Code 94108

Amount of Each Disbursement this Period

Purpose of Disbursement  
PROFESSIONAL SERVICES

001
Category/ Type

21233.28
----------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

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

21902.15
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TOTAL This Period (last page this line number only) ..... ▶

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**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 56 / 108

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

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

A.	Full Name (Last, First, Middle Initial) ACTBLUE	Transaction ID: EXP.B.1093 Date of Disbursement 06 / 20 / 2008
	Mailing Address 14 ARROW STREET, SUITE 11	Amount of Each Disbursement this Period 583.03
	City CAMBRIDGE State MA Zip Code 02138	
	Purpose of Disbursement FUNDRAISING WEBSITE TRANSACTION FEES	003 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ACTBLUE	Transaction ID: EXP.B.1169 Date of Disbursement 06 / 26 / 2008
	Mailing Address 14 ARROW STREET, SUITE 11	Amount of Each Disbursement this Period 203.38
	City CAMBRIDGE State MA Zip Code 02138	
	Purpose of Disbursement FUNDRAISING WEBSITE TRANSACTION FEES	003 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JEHMU GREENE	Transaction ID: EXP.B.1105 Date of Disbursement 06 / 27 / 2008
	Mailing Address 10813 PALL MALL DRIVE	Amount of Each Disbursement this Period 364.12
	City AUSTIN State TX Zip Code 78748	
	Purpose of Disbursement REIMBURSEMENT OF HOTEL ACCOMODATION EXPENSES	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1150.53
<b>TOTAL</b> This Period (last page this line number only) .....	30022.63



# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WOMENCOUNT PAC		FEC IDENTIFICATION NUMBER <b>C</b> C00450098	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee THE DAVIS GROUP, INC.		Date M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 8	
Mailing Address 3601 SOUTH CONGRESS AVENUE BUILDING B, SUITE 100		Amount 19728.00	
City State Zip Code AUSTIN TX 78704		Transaction ID: EDT.EALC.8	
Purpose of Expenditure NATIONAL NEWSPAPER ADVERTISEMENTS		Office Sought: <input type="checkbox"/> House State: MT <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: HILLARY CLINTON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
		304749.87	

(a) SUBTOTAL of Itemized Independent Expenditures .....	19728.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	19728.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
JOAN STECKLER Signature	Date M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 8

**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 58 / 108

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input 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

A.	Full Name (Last, First, Middle Initial) KARITA MATTILA	Transaction ID: EXP.B.1198
	Mailing Address 4851 CERROMAR DRIVE	Date of Disbursement 06 / 30 / 2008
	City NAPLES State FL Zip Code 34112	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CONTRIBUTION REFUND	010 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> ROSEMARY CAMPOSANO			Nature of Debt (Purpose): MEMO: NEWSWIRE SERVICE FEES TO BE REIMBURSED
Mailing Address 505 SAN FELICIA WAY			
City	State	ZIP Code	
LOS ALTOS	CA	94022	

Outstanding Balance Beginning This Period		Transaction ID: PAY:D:1280	
2050.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	2050.00	0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> DANA MORRISSEY			Nature of Debt (Purpose): MEMO: COPYING EXPENSES TO BE REIMBURSED
Mailing Address 2423 LAUREL LANE			
City	State	ZIP Code	
MIDDLETOWN	VA	22645	

Outstanding Balance Beginning This Period		Transaction ID: PAY:D:1277	
668.87			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	668.87	0.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> THE SUTTON LAW FIRM			Nature of Debt (Purpose): PROFESSIONAL SERVICES
Mailing Address 150 POST STREET, SUITE 405			
City	State	ZIP Code	
SAN FRANCISCO	CA	94108	

Outstanding Balance Beginning This Period		Transaction ID: PAY:D:852	
21233.28			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	21233.28	0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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 60 / 108	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
WOMENCOUNT PAC

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor THE SUTTON LAW FIRM	Nature of Debt (Purpose): PROFESSIONAL SERVICES
Mailing Address 150 POST STREET, SUITE 405	
City State ZIP Code SAN FRANCISCO CA 94108	

Outstanding Balance Beginning This Period	<b>Transaction ID: PAY:D:1286</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
10850.78	0.00	10850.78

1) <b>SUBTOTALS</b> This Period This Page (optional).....	10850.78
2) <b>TOTALS</b> This Period (last page this line number only).....	10850.78
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	10850.78

Image# 28932284388

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1146**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1150**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284389

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1152**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1128**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284390

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1124**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1133**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284391

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1113**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1141**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284392

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1138**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1119**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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**Image# 28932284393**

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1155**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1131**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284394

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1129**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1130**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284395

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1154**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1111**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284396

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1140**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1158**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284397

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.907**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.915**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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**Image# 28932284398**

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1009**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.938**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284399

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1015**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.931**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284400

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1011**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.948**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284401

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1001**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1071**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284402

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1000**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.936**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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**Image# 28932284403**

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.962**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.963**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284404

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.964**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.983**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284405

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.930**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.926**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284406

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1038**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.950**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284407

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1036**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1052**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284408

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.922**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.987**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284409

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.974**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.946**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284410

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1090**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.923**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284411

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.921**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.995**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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**Image# 28932284412**

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.920**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1068**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284413

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1028**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.953**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284414

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.909**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1021**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284415

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1060**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.956**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284416

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1002**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.817**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284417

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.842**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.831**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284418

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.824**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.721**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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**Image# 28932284419**

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.680**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.756**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284420

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.772**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.723**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284421

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.675**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.764**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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**Image# 28932284422**

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.708**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.724**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284423

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.678**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.729**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284424

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.701**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.732**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284425

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.674**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE. 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.717**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

\*\*\*\*\*

Image# 28932284426

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.735**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.744**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284427

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.670**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE. 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.706**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

\*\*\*\*\*

Image# 28932284428

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.750**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.736**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284429

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.697**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.727**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284430

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.768**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.725**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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Image# 28932284431

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.762**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.771**

RECEIVED THROUGH INTERMEDIARY ACT BLUE 14 ARROW ST, STE 11, CAMBRIDGE, MA 02138

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**Image# 28932284432**

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.892**

MEMO: NEWSWIRE SERVICE FEES TO BE REIMBURSED

Form/Schedule: **SA11AI**  
Transaction ID: **INC.A.1203**

MEMO: TAXICAB FARE TO BE REIMBURSED

\*\*\*\*\*

**Image# 28932284433**

Form/Schedule: **SB21B**  
Transaction ID: **EXP.B.1105**

SEE SCHEDULE A, MAY MONTHLY

Form/Schedule: **SB21B**  
Transaction ID: **EXP.B.1278**

SEE SCHEDULE A, MAY MONTHLY

\*\*\*\*\*

**Image# 28932284434**

Form/Schedule: **SB21B**

Transaction ID: **EXP.B.1284**

SEE SCHEDULE A, JUNE MONTHLY

Form/Schedule: **SB21B**

Transaction ID: **EXP.B.1282**

SEE SCHEDULE A, MAY MONTHLY

\*\*\*\*\*

Image# 28932284435

Form/Schedule: SE

AMENDMENT SUBMITTED TO FEC 06/11/08

Transaction ID: EDT.EALC.8

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