

# 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  
womenwinning Federal PAC

ADDRESS (number and street) 2324 University Avenue West  
Suite 120B  
 Check if different than previously reported. (ACC)  
St. Paul MN 55114

2. **FEC IDENTIFICATION NUMBER** C00282327  
**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 07 01 2009 through 12 31 2009

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

Type or Print Name of Treasurer Teresa Daly

Signature of Treasurer Electronically Filed by Teresa Daly Date 04 27 2010

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

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

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
womenwinning Federal PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		2797.90
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	2797.90									
(c) Total Receipts (from Line 19) .....	9317.90	9317.90								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	12115.80	12115.80								
7. Total Disbursements (from Line 31) .....	10246.60	10246.60								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1869.20	1869.20								
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) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
womenwinning Federal PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	9071.54	9071.54
(ii) Unitemized .....	246.36	246.36
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	9317.90	9317.90
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	9317.90	9317.90
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)) .....	9317.90	9317.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9317.90	9317.90

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<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.....	246.60	246.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	246.60	246.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	10246.60	10246.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10246.60	10246.60

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	9317.90	9317.90
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9317.90	9317.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	246.60	246.60
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	246.60	246.60

# 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 / 13
	<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

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)  
womenwinning Federal PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Fran J Davis	Date of Receipt MM / DD / YYYY 08 / 31 / 2009
	Mailing Address 1512 Douglas Ave.	<b>Transaction ID:</b> SA11AI.5224
	City State Zip Code Minneapolis MN 55403	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution from Board member to Federal PAC
	Name of Employer Occupation Coldwell Banker Burney Realty Sales Manager	
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) Bud Hayden	Date of Receipt MM / DD / YYYY 09 / 26 / 2009
	Mailing Address 100 2nd Ave S. SE #801	<b>Transaction ID:</b> SA11AI.5203
	City State Zip Code Minneapolis MN 55414	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Member Contribution to Fed PAC
	Name of Employer Occupation Retired Retired	
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) Rachel Hollstadt	Date of Receipt MM / DD / YYYY 09 / 28 / 2009
	Mailing Address 1080 Bluebill Bay Rd	<b>Transaction ID:</b> SA11AI.5189
	City State Zip Code Burnsville MN 55306	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Member Contribution to Fed PAC
	Name of Employer Occupation Hollstadt and Associates CEO	
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) .....	7000.00
<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 7 / 13  
(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)  
womenwinning Federal PAC

**A.**

Full Name (Last, First, Middle Initial)  
Kathryn Pearson

Mailing Address 3417 St. Louis Ave

City State Zip Code  
Minneapolis MN 55416

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

Name of Employer Occupation  
University of Minnesota Assistant Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 294.54

Date of Receipt  
MM / DD / YYYY  
10 / 29 / 2009

**Transaction ID:** SA11AI.5193

Amount of Each Receipt this Period  
98.18

Board Member Contribution to Fed PAC

**B.**

Full Name (Last, First, Middle Initial)  
Kathryn Pearson

Mailing Address 3417 St. Louis Ave

City State Zip Code  
Minneapolis MN 55416

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

Name of Employer Occupation  
University of Minnesota Assistant Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 392.72

Date of Receipt  
MM / DD / YYYY  
11 / 29 / 2009

**Transaction ID:** SA11AI.5196

Amount of Each Receipt this Period  
98.18

Board Member Contribution to Federal PAC

**C.**

Full Name (Last, First, Middle Initial)  
Kathryn Pearson

Mailing Address 3417 St. Louis Ave

City State Zip Code  
Minneapolis MN 55416

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

Name of Employer Occupation  
University of Minnesota Assistant Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 490.90

Date of Receipt  
MM / DD / YYYY  
12 / 29 / 2009

**Transaction ID:** SA11AI.5209

Amount of Each Receipt this Period  
98.18

Board member contribution to Fed PAC

**SUBTOTAL** of Receipts This Page (optional) ..... ► **294.54**

**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 8 / 13  
(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)  
womenwinning Federal PAC

**A.**

Full Name (Last, First, Middle Initial) Amy Rotenberg		Date of Receipt MM / DD / YYYY 10 / 15 / 2009
Mailing Address 90 South 7th Street		<b>Transaction ID:</b> SA11AI.5191
City Minneapolis	State MN	Zip Code 55402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 259.00
Name of Employer Rotenberg Associates	Occupation President	Board Member Contribution to Fed PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 259.00	

**B.**

Full Name (Last, First, Middle Initial) Amy Rotenberg		Date of Receipt MM / DD / YYYY 11 / 15 / 2009
Mailing Address 90 South 7th Street		<b>Transaction ID:</b> SA11AI.5194
City Minneapolis	State MN	Zip Code 55402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 259.00
Name of Employer Rotenberg Associates	Occupation President	Board Member Contribution to Fed PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 518.00	

**C.**

Full Name (Last, First, Middle Initial) Amy Rotenberg		Date of Receipt MM / DD / YYYY 12 / 15 / 2009
Mailing Address 90 South 7th Street		<b>Transaction ID:</b> SA11AI.5197
City Minneapolis	State MN	Zip Code 55402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 259.00
Name of Employer Rotenberg Associates	Occupation President	Board Member Contribution to Federal PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 777.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	777.00
<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 9 / 13	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
womenwinning Federal PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Cherie Stofer		Date of Receipt
	Mailing Address 4604 Gulf Terrace		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Edina	MN	55424
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Summit Performance		Occupation Management Consultant	Transaction ID: SA11AI.5206
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
		<input type="text" value="1000.00"/>	Member Contribution to Fed PAC

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="9071.54"/>

**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 10 / 13

<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)  
womenwinning Federal PAC

A.	Full Name (Last, First, Middle Initial) US Bank	Transaction ID: SB21B.5232 Date of Disbursement 10 / 19 / 2009
	Mailing Address PO Box 64407	Amount of Each Disbursement this Period 7.57
	City St. Paul State MN Zip Code 55164-9360	
	Purpose of Disbursement Bank Fee Candidate Name	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) US Bank	Transaction ID: SB21B.5230 Date of Disbursement 10 / 31 / 2009
	Mailing Address PO Box 64407	Amount of Each Disbursement this Period 3.15
	City St. Paul State MN Zip Code 55164-9360	
	Purpose of Disbursement Bank Fee Candidate Name	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) US Bank	Transaction ID: SB21B.5227 Date of Disbursement 11 / 02 / 2009
	Mailing Address PO Box 64407	Amount of Each Disbursement this Period 3.15
	City St. Paul State MN Zip Code 55164-9360	
	Purpose of Disbursement Bank Fee Candidate Name	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) .....	13.87
<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)  
womenwinning Federal PAC

<b>A.</b> Full Name (Last, First, Middle Initial) US Bank <hr/> Mailing Address PO Box 64407 <hr/> City State Zip Code St. Paul MN 55164-9360 <hr/> Purpose of Disbursement Bank fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5233 <b>Date of Disbursement</b> MM / DD / YYYY 11 / 17 / 2009
	Amount of Each Disbursement this Period 7.57
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) US Bank <hr/> Mailing Address PO Box 64407 <hr/> City State Zip Code St. Paul MN 55164-9360 <hr/> Purpose of Disbursement Bank Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5219 <b>Date of Disbursement</b> MM / DD / YYYY 11 / 30 / 2009
	Amount of Each Disbursement this Period 10.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) US Bank <hr/> Mailing Address PO Box 64407 <hr/> City State Zip Code St. Paul MN 55164-9360 <hr/> Purpose of Disbursement Bank Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.5228 <b>Date of Disbursement</b> MM / DD / YYYY 12 / 01 / 2009
	Amount of Each Disbursement this Period 3.15
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

20.72

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 13

<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)  
womenwinning Federal PAC

<b>A.</b> Full Name (Last, First, Middle Initial) US Bank Mailing Address PO Box 64407 City St. Paul State MN Zip Code 55164-9360 Purpose of Disbursement Bank fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5234 Date of Disbursement 12 / 17 / 2009
	Amount of Each Disbursement this Period 7.57
<b>B.</b> Full Name (Last, First, Middle Initial) US Bank Mailing Address PO Box 64407 City St. Paul State MN Zip Code 55164-9360 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5229 Date of Disbursement 12 / 31 / 2009
	Amount of Each Disbursement this Period 3.15

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

10.72

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

45.31

**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)

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

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NAME OF COMMITTEE (In Full)  
womenwinning Federal PAC

A.	Full Name (Last, First, Middle Initial) Friends for Tarryl	Transaction ID: SB23.5218 Date of Disbursement 09 / 30 / 2009
	Mailing Address Po Box 489	Amount of Each Disbursement this Period 5000.00
	City St Cloud State MN Zip Code 56302	
	Purpose of Disbursement	Category/Type
	Candidate Name Friends for Tarryl	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends for Tarryl	Transaction ID: SB23.5225 Date of Disbursement 09 / 30 / 2009
	Mailing Address Po Box 489	Amount of Each Disbursement this Period 5000.00
	City St Cloud State MN Zip Code 56302	
	Purpose of Disbursement	Category/Type
	Candidate Name Friends for Tarryl	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	10000.00