

**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

National Organization for Women PAC

ADDRESS (number and street)

1100 H Street, NW

3rd Fl

☐Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00092247

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

08

01

2011

through

08

31

2011

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

Allendra Letsome

Signature of Treasurer

Electronically Filed by Allendra Letsome

Date

09

16

2011

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

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
National Organization for Women PAC

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2011	37856.23
(b) Cash on Hand at Beginning of Reporting Period	33148.04	
(c) Total Receipts (from Line 19)	24021.25	39901.02
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	57169.29	77757.25
7. Total Disbursements (from Line 31)	608.92	21196.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	56560.37	56560.37
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

National Organization for Women PAC

Report Covering the Period:

From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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)	2385.00	4935.00
(ii) Unitemized	21636.25	34966.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)	24021.25	39901.02
(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)	24021.25	39901.02
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))	24021.25	39901.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	24021.25	39901.02

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	598.92	19121.88	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	598.92	19121.88	
22. Transfers to Affiliated/Other Party Committees.....	0.00	860.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1000.00	
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	10.00	30.00	
(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))	10.00	30.00	
29. Other Disbursements.....	0.00	185.00	
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))..	608.92	21196.88	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	608.92	21196.88	

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)	24021.25	39901.02
34. Total Contribution Refunds (from Line 28(d))	10.00	30.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24011.25	39871.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	598.92	19121.88
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	598.92	19121.88

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

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

FOR LINE NUMBER: PAGE 6 / 12

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Organization for Women PAC

A.

Full Name (Last, First, Middle Initial)

Ms. Priscilla Bellairs

Mailing Address 63 Purchase Street

City

Newburyport

State

MA

Zip Code

01950-3141

FEC ID number of contributing
federal political committee.

C

Name of Employer
N. ESSEX COMM COLLEGE, HA-
VERHILL, MA

Occupation
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

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

Transaction ID: SA11AI.38774

Amount of Each Receipt this Period

40.00

Ms. Priscilla B. Bellairs

B.

Full Name (Last, First, Middle Initial)

Ms. Jean Burkholder

Mailing Address 506 W Oregon St

City

Urbana

State

IL

Zip Code

61801-4044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.38477

Amount of Each Receipt this Period

225.00

Ms. Jean A. Burkholder

C.

Full Name (Last, First, Middle Initial)

Mrs. Rosetta Celentano

Mailing Address P.O. Box 333

City

Hyannis Port

State

MA

Zip Code

02647-0333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.38376

Amount of Each Receipt this Period

300.00

Mrs. Rosetta M. Celentano

SUBTOTAL of Receipts This Page (optional)

565.00

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 7 / 12

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Organization for Women PAC

A.

Full Name (Last, First, Middle Initial)

Ms. Susan Damplo

Mailing Address 23 Old Sprain Rd

City

Ardsley

State

NY

Zip Code

10502-2017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
not given

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.38782

Amount of Each Receipt this Period

250.00

Ms. Susan M. Damplo

B.

Full Name (Last, First, Middle Initial)

Ms. Mary Davis

Mailing Address 351 Calle La Mesa

City

Moraga

State

CA

Zip Code

94556-1605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.38766

Amount of Each Receipt this Period

300.00

Ms. Mary L. Davis

C.

Full Name (Last, First, Middle Initial)

Ms. Diane DiCarlo

Mailing Address 65 Wellesley Avenue

City

Needham

State

MA

Zip Code

02494-1821

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

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

Transaction ID: SA11AI.38712

Amount of Each Receipt this Period

35.00

Ms. Diane DiCarlo

SUBTOTAL of Receipts This Page (optional)

585.00

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 8 / 12

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Organization for Women PAC

A.

Full Name (Last, First, Middle Initial)

Ms. Sue Errington

Mailing Address 3200 Brook Drive

City

Muncie

State

IN

Zip Code

47304-2915

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLANNED PARENTHOOD OF GRE-
ATER INDIANA

Occupation

DIRECTOR OF PUBLIC POLICY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.38784

Amount of Each Receipt this Period

30.00

Senator Sue Errington

B.

Full Name (Last, First, Middle Initial)

Ms. Edith Herron

Mailing Address 36 Park Avenue

City

Rehoboth Beach

State

DE

Zip Code

19971-2842

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

COMPUTER CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

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

Transaction ID: SA11AI.38717

Amount of Each Receipt this Period

40.00

Ms. Edith C. Herron

C.

Full Name (Last, First, Middle Initial)

Ms. Betty Holling

Mailing Address 15 Sylvan Avenue

City

Chelmsford

State

MA

Zip Code

01824-2327

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 ▼

280.00

Date of Receipt

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

Transaction ID: SA11AI.38702

Amount of Each Receipt this Period

35.00

Ms. Betty J. Holling

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 12

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Organization for Women PAC

A.

Full Name (Last, First, Middle Initial)

Ms Constance Murray

Mailing Address 10 Oak Meadow Ln

City

Carmel Valley

State

CA

Zip Code

93924-9455

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 4 / 2 0 1 1

Transaction ID: SA11AI.38285

Amount of Each Receipt this Period

500.00

Ms. Constance Murray

B.

Full Name (Last, First, Middle Initial)

Ms. Terry O'Neill, Esq.

Mailing Address 8322 N. Brook Lane

City

Bethesda

State

MD

Zip Code

20814-2613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Montgomery County Council

Occupation
Chief of Staff to CM Tractenberg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.38697

Amount of Each Receipt this Period

100.00

Ms. Terry A. O'Neill Esq.

C.

Full Name (Last, First, Middle Initial)

Ms. Shirley Plapp

Mailing Address 8914 Rockmont Terrace

City

Colorado Springs

State

CO

Zip Code

80920-6802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.38790

Amount of Each Receipt this Period

30.00

Ms. Shirley Plapp

SUBTOTAL of Receipts This Page (optional)

630.00

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 10 / 12

(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)

National Organization for Women PAC

A.

Full Name (Last, First, Middle Initial)

Ms. Michelle Stuhl

Mailing Address P.O.Box 430

City

Shokan

State

NY

Zip Code

12481

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
CEO

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.38540

Amount of Each Receipt this Period

500.00

Ms. Michelle Stuhl

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

2385.00

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)

PAGE 11 / 12

<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)

National Organization for Women PAC

A.

Full Name (Last, First, Middle Initial)

Authorize.net

Mailing Address 915 S. 500 E.
Suite 200

City American Fork State UT Zip Code 84003

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.38858

Date of Disbursement

08 / 02 / 2011

Amount of Each Disbursement this Period

27.10

B.

Full Name (Last, First, Middle Initial)

Global STL NDPS

Mailing Address 10 Glenlake Parkway NE
North Tower

City Atlanta State GA Zip Code 30328

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.38859

Date of Disbursement

08 / 02 / 2011

Amount of Each Disbursement this Period

42.80

C.

Full Name (Last, First, Middle Initial)

Global STL NDPS

Mailing Address 10 Glenlake Parkway NE
North Tower

City Atlanta State GA Zip Code 30328

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.38860

Date of Disbursement

08 / 02 / 2011

Amount of Each Disbursement this Period

54.86

SUBTOTAL of Disbursements This Page (optional)

124.76

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 / 12

<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)

National Organization for Women PAC

A.

Full Name (Last, First, Middle Initial)

Payment Solutions

Mailing Address P O Box 30217

City
Bethesda

State
MD

Zip Code
20924

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.38850

Date of Disbursement

/ /

Amount of Each Disbursement this Period

129.00

B.

Full Name (Last, First, Middle Initial)

Payment Solutions

Mailing Address P O Box 30217

City
Bethesda

State
MD

Zip Code
20924

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.38854

Date of Disbursement

/ /

Amount of Each Disbursement this Period

122.80

C.

Full Name (Last, First, Middle Initial)

The Hartford

Mailing Address PO Box 620

City
New Hartford

State
NY

Zip Code
13413

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.38856

Date of Disbursement

/ /

Amount of Each Disbursement this Period

42.48

SUBTOTAL of Disbursements This Page (optional)

294.28

TOTAL This Period (last page this line number only)

419.04