

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

National Organization for Women PAC

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)

Election on / / in the State of

(d) 30-Day POST-Election Report for the:

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

Election on / / in the State of

5. Covering Period / / through / /

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 Linda Berg

Signature of Treasurer Linda Berg [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

National Organization for Women PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="58164.86"/>	<input type="text" value="58164.86"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="80744.25"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="18787.99"/>	<input type="text" value="76061.57"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="99532.24"/>	<input type="text" value="134226.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="874.07"/>	<input type="text" value="35568.26"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="98658.17"/>	<input type="text" value="98658.17"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

National Organization for Women PAC

Report Covering the Period: From: / / To: / /

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).....	4245.00	14840.00
(ii) Unitemized	14440.89	61119.47
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	18685.89	75959.47
(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)	18685.89	75959.47
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).....	102.10	102.10
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	18787.99	76061.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	18787.99	76061.57

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	374.07	28818.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	374.07	28818.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	6750.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	874.07	35568.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	874.07	35568.26

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	18685.89	75959.47
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18685.89	75959.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	374.07	28818.26
37. Offsets to Operating Expenditures (from Line 15, page 3).....	102.10	102.10
38. Net Operating Expenditures (subtract Line 37 from Line 36)	271.97	28716.16

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

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

FOR LINE NUMBER: PAGE 6 OF 32
(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

Full Name (Last, First, Middle Initial)
A. Joan H. Bacall

Mailing Address 5 Timber Ln Unit 208

City Exeter State NH Zip Code 03833-5334

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.6766

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. M Coleen Barker

Mailing Address 33542 Valle Road

City San Juan State CA Zip Code 92675-4800

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.6625

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Emily Louise Brister

Mailing Address 1934 Covington Ct

City Chico State CA Zip Code 95926-9615

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.6488

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **75.00**

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI
Transaction ID : SA11AI.6766
6976542

Form/Schedule: SA11AI
Transaction ID: SA11AI.6625
5662994

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6488

11806361

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 32
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Organization for Women PAC

A. Janet Canterbury
 Full Name (Last, First, Middle Initial)
 Mailing Address 10700 SW 90 Ave
 City Miami State FL Zip Code 33176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer university of miami Occupation dean. medical school
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.6355
 Amount of Each Receipt this Period
 50.00

B. Xandra Coe
 Full Name (Last, First, Middle Initial)
 Mailing Address 3827 Sheridan Avenue, S.
 City Minneapolis State MN Zip Code 55410-1227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation artist
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.6645
 Amount of Each Receipt this Period
 25.00

C. Diane DiCarlo
 Full Name (Last, First, Middle Initial)
 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: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.6783
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
TOTAL This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6355

391649

Form/Schedule: SA11AI

Transaction ID: SA11AI.6645

12582423

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6783

4919130

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 32
	<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. Sue Errington
Full Name (Last, First, Middle Initial)

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 greater indiana Occupation director of public policy

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
09 / 22 / 2014
Transaction ID : SA11AI.6614

Amount of Each Receipt this Period
300.00

B. Dorothy Goodman
Full Name (Last, First, Middle Initial)

Mailing Address 30 Harvest Cir

City Lincoln State MA Zip Code 01773-3212

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
09 / 09 / 2014
Transaction ID : SA11AI.6586

Amount of Each Receipt this Period
400.00

C. Jack Hartray
Full Name (Last, First, Middle Initial)

Mailing Address 2019 N Sedgwick St

City Chicago State IL Zip Code 60614-4716

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
09 / 05 / 2014
Transaction ID : SA11AI.6495

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	580.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6614

410605

Form/Schedule: SA11AI

Transaction ID: SA11AI.6586

5193230

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6495

12677869

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 15 OF 32
(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. Edith Herron
 Full Name (Last, First, Middle Initial)
 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: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.6630
 Amount of Each Receipt this Period
 40.00

B. Betty Holling
 Full Name (Last, First, Middle Initial)
 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: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.6435
 Amount of Each Receipt this Period
 35.00

C. Cynthia Jimenez
 Full Name (Last, First, Middle Initial)
 Mailing Address 932 Franklin Street
 City Wyomissing State PA Zip Code 19610-3003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation retired
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014
Transaction ID : SA11AI.6837
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6630

7129521

Form/Schedule: SA11AI

Transaction ID: SA11AI.6435

1617604

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6837

354035

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 32
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial)
A. Judy Judd

Mailing Address 1241 Island Drive, #101

City Ann Arbor State MI Zip Code 48105-2006

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.6396

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Susan Murray

Mailing Address 1636 W Greenleaf Ave Apt 3W

City Chicago State IL Zip Code 60626-2761

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.6449

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. Zoanne Nordstrom

Mailing Address 370 Surrey Street

City San Francisco State CA Zip Code 94131-2960

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.6631

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	1325.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI
Transaction ID : SA11AI.6396
415851

Form/Schedule: SA11AI
Transaction ID: SA11AI.6449
12655192

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6631

716373

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 32
	<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)
National Organization for Women PAC

A. Terry O'Neill
Full Name (Last, First, Middle Initial)

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 national organization for women Occupation president of now

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **810.00**

Date of Receipt **09 / 22 / 2014**

Transaction ID : SA11AI.6814

Amount of Each Receipt this Period **100.00**

B. Glenda Peterson
Full Name (Last, First, Middle Initial)

Mailing Address 3024 Georgian Ct

City Lincoln State NE Zip Code 68502-5028

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **09 / 12 / 2014**

Transaction ID : SA11AI.6593

Amount of Each Receipt this Period **220.00**

C. Susan Rothenberg
Full Name (Last, First, Middle Initial)

Mailing Address 173 Otis St

City Newtonville State MA Zip Code 02465

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

Name of Employer retired Occupation retired social worker

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **09 / 04 / 2014**

Transaction ID : SA11AI.6461

Amount of Each Receipt this Period **200.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **520.00**

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI
Transaction ID : SA11AI.6814
10595312

Form/Schedule: SA11AI
Transaction ID: SA11AI.6593
9578931

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.6461

7460223

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 32
	<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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial)
A. Teryl Springstead

Mailing Address P.O. Box 16065

City San Diego State CA Zip Code 92176

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

Name of Employer women's southwest federal credit union Occupation branch manager / retired

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11AI.6853

Amount of Each Receipt this Period
400.00

Full Name (Last, First, Middle Initial)
B. Dolores Stickler

Mailing Address 2323 Pittson Ave

City Scranton State PA Zip Code 18505

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11AI.6533

Amount of Each Receipt this Period
750.00

Full Name (Last, First, Middle Initial)
C. Mona Taylor

Mailing Address 138 N Garfield Rd

City Hinsdale State IL Zip Code 60521-3720

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.6413

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... **1185.00**

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI
Transaction ID : SA11AI.6853
11087921

Form/Schedule: SA11AI
Transaction ID: SA11AI.6533
11388543

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6413

10699023

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 27 OF 32
(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. Linda Tosti-Lane
 Full Name (Last, First, Middle Initial)
 Mailing Address 3794 232nd Place SW
 City Brier State WA Zip Code 98036-8268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer dshs Occupation social work supervisor
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.6640
 Amount of Each Receipt this Period
 25.00

B. Victor Yngve
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 Crest Dr
 City Chesterton State IN Zip Code 46304-1005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014
Transaction ID : SA11AI.6571
 Amount of Each Receipt this Period
 150.00

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	4245.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.6640

557546

Form/Schedule: SA11AI

Transaction ID: SA11AI.6571

12552321

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

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

FOR LINE NUMBER: PAGE 29 OF 32
(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)
Joanne Tosti-Vasey

Mailing Address 429 N Spring St

City Bellefonte State PA Zip Code 16823-1523

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

Name of Employer tosti-vasey & vasey Occupation partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **312.10**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA15.6892

Amount of Each Receipt this Period
102.10

return of reimbursement

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	102.10
TOTAL This Period (last page this line number only).....▶	102.10

**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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial)

A. Authnet Gateway Authorize.Net

Mailing Address PO Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
credit card processing fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2014

Transaction ID : SB21B.6887

Amount of Each Disbursement this Period

26.60

Category/
Type

Full Name (Last, First, Middle Initial)

B. Chase Paymentech Solutions

Mailing Address 4 Northeastern Blvd.

City Salem State NH Zip Code 03079

Purpose of Disbursement
credit card fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2014

Transaction ID : SB21B.6894

Amount of Each Disbursement this Period

94.97

Category/
Type

Full Name (Last, First, Middle Initial)

C. Global STL Global Payments

Mailing Address 10 Glenlake Parkway, NE
North Tower

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
credit card processing fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2014

Transaction ID : SB21B.6888

Amount of Each Disbursement this Period

91.06

Category/
Type

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

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

212.63

**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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial)

A. Payment Solutions

Mailing Address PO Box 30217

City State Zip Code
Bethesda MD 20824

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SB21B.6881

Amount of Each Disbursement this Period

104.40

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

104.40

317.03

**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 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)
National Organization for Women PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF CHERI BUSTOS

Mailing Address P.O. BOX 77

City EAST MOLINE State IL Zip Code 61244

Purpose of Disbursement

Candidate Name
FRIENDS OF CHERI BUSTOS

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: IL District: 17

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 19 / 2014

Transaction ID : SB23.6882

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

500.00

500.00